


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 17, 2007 08:00 AM
Secretary of State

DOCUMENT # L01000003308 1. Entity Name DEVELOPMENT INTERNATIONAL GROUP, LLC	
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Principal Place of Business 8700 WEST FLAGLER ST SUITE 355 MIAMI, FL 33174	Mailing Address 8700 WEST FLAGLER ST SUITE 355 MIAMI, FL 33174
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DO NOT WRITE IN THIS SPACE



01032007No Chg-LLC

CR2E083 (11/05)

4. FEI Number 65-1080432	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent REGISTERED AGENTS OF FLORIDA, LLC 100 S.E. SECOND STREET SUITE 2900 MIAMI, FL 33131	DO NOT WRITE IN THIS SPACE
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

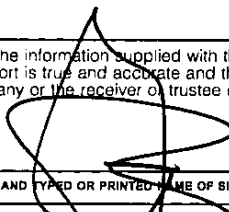
**Filing Fee is \$50.00
Due by May 1, 2007**

U000000588154
01/17/07-80061-008 55.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM GUTIERREZ, ENRIQUE H 8700 WEST FLAGLER ST SUITE 355 MIAMI, FL 33174
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM GUTIERREZ, ARIEL E 8700 WEST FLAGLER ST STE 355 MIAMI, FL 33174
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM LATIMER, RUSSELL 8700 WEST FLAGLER ST STE 355 MIAMI, FL 33174
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:  Ariel E. Gutierrez, President 01/03/2007 305 553-8911

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #