2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED DOCUMENT # L01000007854 NORTHWEST DEVELOPMENT GROUP, LLC 2007 APR 30 AM 10: 53 SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 936 INTRACOASTAL DRIVE 936 INTRACOASTAL DRIVE **SUITE 2002 SUITE 2002** FORT LAUDERDALE, FL 33304 US FORT LAUDERDALE, FL 33304 HS 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 2750 N. 29 H 2750 n. 29th Suite, Apt. #, etc. Suite, Apt. #. etc. 04192007 CR2E083 (12/06) Chg-LLC Buite 202 suite 202 City & State City & State 4. FEI Number Applied For Hully wood 80-0025045 Not Applicable Country Zip Country \$5.00 Additional 5. Certificate of Status Desired 33020 33020 USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HALL, FRANK Street Address (P.O. Box Number is Not Acceptable) 2750 NORTH 29TH AVENUE **SUITE 202** HOLLYWOOD, FL 33020 City Zip Code 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 age SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Make check payable to Amended AR is \$50.00 Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. MGR Change ☐ Addition TITLE ☐ Delete TITLE 000101701320 05/07/07--01014--001 **\$0 CCV DEVELOPMENT CORP, INC. NAME NAME STREET ADDRESS 936 INTRACOASTAL DRIVE STREET ADDRESS **50.00 CITY ST-ZIP CITY-ST-ZIP FORT LAUDERDALE, FL 33304 Delete TITLE MGR TITLE ☐ Change ☐ Addition COLE DIVERSIFIED, LLC NAME STREET ADDRESS 10 NURMI DRIVE STREET ADDRESS FORT LAUDERDALE, FL 33301 CITY-ST-ZIP CITY-ST-7(P TITLE ☐ Delcte TITLE Change ☐ Addition SCC CONSULTING GROUP, LIMITED COMPANY NAME NAME STREET ADDRESS 7512 NW 41ST STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CORAL SPRINGS, FL 33065 TITLE MGR ☐ Delete TITLE ☐ Change ■ Addition BUNCHE PARK, INC. NAME NAME STREET ADDRESS 2750 NORTH 29TH AVENUE STREET ADDRESS HOLLYWOOD, FL 33020 CITY-ST-ZIP CITY-ST-ZIP Delete Change Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 11. Thereby certify that the information supplied with this filling 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE