`'` 2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L01000010033

1. Entity Name
INTERFACE DEVELOPMENT, LLC

Principal Place of Business	Mailing Address
2600 N MILITARY TRL # 290 BOCA RATON, FL 33431	2600 N MILITARY TRL # 290 BOCA RATON, FL 33431

DO NOT WRITE IN THIS SPACE

04192007 No Chg-LLC   CR2E083 (11/05)

4. FEI Number	Applied For
65-1112646	Not Applicable

5. Certificate of Status Desired   ☐   **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

GOODMAN, KENNETH
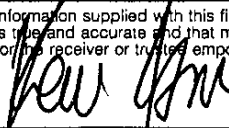2600 N MILITARY TRL, #290
BOCA RATON, FL 33431

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IN THIS SPACE

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

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	GOODMAN, KENNETH
STREET ADDRESS	2600 N MILITARY TRL, # 290
CITY-ST-ZIP	BOCA RATON, FL 33431
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/11/07-80052-023 50.00

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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: _____   4·23·07   561·802·0777

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