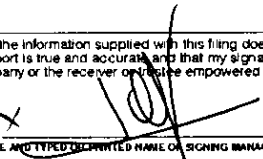


FILED
03 MAY 30 PM 4:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**2003 LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # L01000013751					
1. Entity Name GRAND KEY ESTATES, L.C.					
Principal Place of Business 1101 BRICKELL AVE NORTH TOWER SUITE 400 MIAMI, FL 33131 US			Mailing Address 1101 BRICKELL AVE NORTH TOWER SUITE 400 MIAMI, FL 33131 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 65-1141600	
				Applied For Not Applicable	
				5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent MURAJ WALD BIONDO & MORENO, P.A. 900 INGRAHAM BUILDING 26 S.E. 2ND AVENUE MIAMI, FL 33131				7. Name and Address of New Registered Agent	
				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL 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 accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agents signature required when submitting)					
FILE NOW!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2004					
9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS/CHANGES		
TITLE	MGRM	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	GRAND DEVELOPERS HOLDING CORP.		NAME		
STREET ADDRESS	1101 BRICKELL AVE SUITE 400 SO TOWER		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33131		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition	
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		
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(x), 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 80B, Florida Statutes.					
SIGNATURE: 			5/29/03		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date		

CR2E083 (10/02)

100020292611



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 113191 81522A

AUTHORIZATION :

Patricia Pizutto

COST LIMIT : \$ 55.00

ORDER DATE : May 30, 2003

ORDER TIME : 3:01 PM

ORDER NO. : 113191-005

CUSTOMER NO: 81522A

CUSTOMER: Ms. Maria Victoria Currais
Murai Wald Biondo & Moreno,
900 Ingraham Building
25 S.e. 2nd Avenue
Miami, FL 33131-1506

ANNUAL REPORT FILING

FILED
03 MAY 30 PM 4:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NAME: GRAND KEY ESTATES, L.C.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight-EXT#1156

EXAMINER'S INITIALS: _____