2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 15, 2007 08:00 AM
Secretary of State

DOCUMENT # L01000014470

1. Entity Name
V.A.C. BUILDERS, L.L.C.

Principal Place of Business	Mailing Address
10300 SW 72 STREET SUITE 318 MIAMI, FL 33173	10300 SW 72 STREET SUITE 318 MIAMI, FL 33173

02122007 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1134500
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

VALDERRAMA, JUAN LUIS
10300 SW 72 ST., #318
MIAMI, FL 33173

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

Filing Fee is $50.00
Due by May 1, 2007

000000637236
02/26/07-80053-007 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	D
NAME	SANTA MONICA DEVELOPMENT CORP
STREET ADDRESS	10300 SW 72 ST., #318
CITY-ST-ZIP	MIAMI, FL 33173
TITLE	D
NAME	INTEGRAL BUSINESS AND INVEST
STREET ADDRESS	10300 SW 72 ST., #318
CITY-ST-ZIP	MIAMI, FL 33173
TITLE	D
NAME	SANTA LUCIA DEVELOPMENT CORP
STREET ADDRESS	10300 SW 72 ST., #318
CITY-ST-ZIP	MIAMI, FL 33173
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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: JUAN VALDERRAMA PRESIDENT 2-12-07 305-310 6716
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #