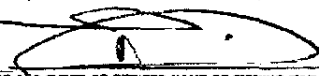


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 20, 2006 08:00 AM
Secretary of State

DOCUMENT # L02000006252 1. Entity Name ALHAMBRA GRAND PARTNERS OF SOUTH FLORIDA, LLC					
Principal Place of Business 815 NW 57 AVE STE 405 MIAMI, FL 33126			Mailing Address 815 NW 57 AVE STE 405 MIAMI, FL 33126		
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country			3. Mailing Address Suite, Apt. #, etc. City & State Zip Country		
					
01242006 Chg-LLC CR2E083 (11/05)					
4. FEI Number 02-0571317				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent LAW OFFICES PATRICA O ESPINOSA PA 815 NW 57 AVE., STE 405 MIAMI, FL 33126			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 _____ (NOTE: Registered Agent signature required when resigning) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES					
TITLE	MGRM	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	RICHARDSON TRUST INVESTMENT		NAME		
STREET ADDRESS	4501 FORD AVE., STE 102		STREET ADDRESS		
CITY-ST-ZIP	ALEXANDRIA, VA 22301		CITY-ST-ZIP		
TITLE	MGRM	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	MEBECH GROUP SERVICES, INC		NAME		
STREET ADDRESS	815 NW 57 AVE., STE 405		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33126		CITY-ST-ZIP		
TITLE	MGRM	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	VAIERRA, LLC		NAME		
STREET ADDRESS	3727 SW 8 SHEER 102		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33134		CITY-ST-ZIP		
TITLE	MGRM	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	URBAN CONCEPTS, LLC		NAME		
STREET ADDRESS	200 BRICKELL AVE., STE 900		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33131		CITY-ST-ZIP		
TITLE	MGRM	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	DIAZ, MANUER		NAME		
STREET ADDRESS	3960 WOOD AVE		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 331330		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 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: 			Date 3/16/06 Daytime Phone #		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					