2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L02000006252

FILED Mar 23, 2009 Secretary of State

Entity Name: ALHAMBRA GRAND PARTNERS OF SOUTH FLORIDA, LLC

Current Principal Place of Business: New Principal Place of Business:

7321 LOS PINOS BLVD 9745 SW-72TH. STREET

CORAL GABLES, FL 33143 # 222

MIAMI, FL 33173

Current Mailing Address: New Mailing Address:

7321 LOS PINOS BLVD 9745 SW. 72TH. STREET

CORAL GABLES, FL 33143 # 222 MIAMI, FL 33173

FEI Number: 02-0571317 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LAW OFFICES PATRICA O ESPINOSA PA 232 ANDALUCIA AVE SUITE NO: 370 CORAL GABLES, FL 33134 US

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.

SIGNATURE:

Electronic Signature of Registered Agent Date

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MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 RICHARDSON TRUST INV, ESTMENT
 Name:

 Address:
 4501 FORD AVE., STE 102
 Address:

 City-St-Zip:
 ALEXANDRIA, VA 22301
 City-St-Zip:

Title: MGRM () Delete Title: MGRM (X) Change () Addition
Name: BEC GROUP SERVICES,, INC
Address: 7321 LOS PINOS BLVD. Address: 9745 SW 72TH. STREET- SUITE # 222

Address: 7.321 LUS MINUS BLVU. Address: 9/45 SW 721H, STREET- SUITE # 222

City-St-Zip: CORAL GABLES, FL 33143 City-St-Zip: MIAMI, FL 33173

Title: MGRM () Delete Title: () Change () Addition Name: VALERIA, LLC, Name:

 Address:
 3727 SW 8 STREET ,SUITE # 102
 Address:

 City-St-Zip:
 MIAMI, FL 33134
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 URBAN CONCEPTS, LLC,
 Name:

 Address:
 315 RIDGEWOOD RD.
 Address:

 City-St-Zip:
 KEY BISCAYNE, FL 33149
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 DIAZ, MANUEL
 Name:

 Address:
 3960 WOOD AVE
 Address:

 City-St-Zip:
 MIAMI, FL 33133
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: FRANCISCO ESPINOSA MGRM 03/23/2009