
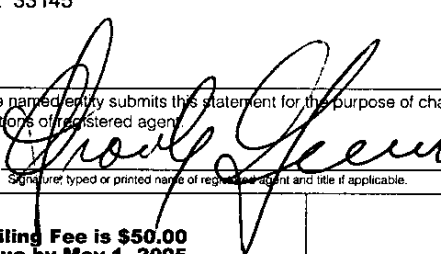



2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2005 8:00 am
Secretary of State

04-29-2005 90055 035 ****50.00

DOCUMENT # L02000011216 1. Entity Name NEO DEVELOPMENT, LLC			
Principal Place of Business 3375 SW 3RD AVE. MIAMI, FL 33145		Mailing Address 3375 SW 3RD AVE. MIAMI, FL 33145	
2. Principal Place of Business 1637 S.W. 8th St Suite, Apt. #, etc.		3. Mailing Address 1637 S.W. 8th St Suite, Apt. #, etc.	
City & State Miami, FL Zip 33135 Country USA		City & State Miami, FL Zip 33135 Country USA	
4. FEI Number 84-1624656		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent CONTRERAS, GILBERT A 3375 SW 3RD AVE. MIAMI, FL 33145		7. Name and Address of New Registered Agent Name Frank Guerra Street Address (P.O. Box Number is Not Acceptable) 1637 S.W. 8th St. City Miami FL Zip Code 33135	
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 _____ <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State	
9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM CALDERON, LISSETTE 3375 SW 3 AVE. MIAMI, FL 33145	<input type="checkbox"/> Delete	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM GUERRA, FRANK 3375 SW 3 AVE. MIAMI, FL 33145	<input type="checkbox"/> Delete	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM GUERRA, FRANK 3375 SW 3 AVE. MIAMI, FL 33145	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM GUERRA, FRANK 3375 SW 3 AVE. MIAMI, FL 33145	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM GUERRA, FRANK 3375 SW 3 AVE. MIAMI, FL 33145	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM GUERRA, FRANK 3375 SW 3 AVE. MIAMI, FL 33145	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 _____ Daytime Phone # (305) 285-1418	