## 2005 LIMITED LIABILITY COMPANY

## **FILED** Mar 19, 2005 08:00 AM

ANNUAL REPORT	Secretary of State
DOCUMENT # L02000016747  1. Entity Name REDEVCO CIVIC CENTER, LLC	
Principal Place of Business Mailing Address 1175 NE 125TH ST. STE 103 1175 NE 125TH ST. STE 103 MIAMI, FL 33161 MIAMI, FL 33161	
DO NOT WRITE IN THIS SPACE	02232005No Chg-LLC CR2E083 (10/03)
	33-1011786 Not Applicab  5. Certificate of Status Desired Spee Required  \$5.00 Additional Fee Required
6. Name and Address of Current Registered Agent  KOLSKY, DEBRA S 1175 NE 125TH ST. STE 103  N. MIAMI, FL 33161	DO NOT WRITE IN THIS SPACE
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  Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating)  DATE	
Filing Fee is \$50.00 Due by May 1, 2005	U00000270228 03/19/05-80043-002 50.00
MANAGING MEMBERS/MANAGERS  TITLE MGR  NAME KOLSKY, DEBRA S  STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33161  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
NAME STREET ADDRESS :	

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

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE: SIGNATURE AND TYPED OR PROVIDED NAME OF SIGN I Colado NG MANAGING WEMBER, OR AUTHORIZED REPRESENTATIVE

305-981-4500