

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000018076

FILED
May 05, 2008
Secretary of State

Entity Name: LAS OLAS FIRST DEVELOPMENT, L.L.C.

Current Principal Place of Business:

2875 N.E. 191ST STREET
SUITE 300
AVENTURA, FL 33180

New Principal Place of Business:

2875 N.E. 191ST STREET
SUITE 801
AVENTURA, FL 33180

Current Mailing Address:

2875 N.E. 191ST STREET
SUITE 300
AVENTURA, FL 33180

New Mailing Address:

2875 N.E. 191ST STREET
SUITE 801
AVENTURA, FL 33180

FEI Number: 13-4204701 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SERBER, DANIEL J ESQ
2875 N.E. 191ST STREET #80L
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

SERBER, DANIEL J ESQ
2875 N.E. 191ST STREET #801
AVENTURA, FL 33180 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:

05/05/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WORK LEADER CORP,
Address: 2875 NE 191ST ST.,SUITE 300
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: WORK LEADER CORP,
Address: 2875 NE 191ST ST.,SUITE 801
City-St-Zip: AVENTURA, FL 33180

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: RICARDO DJMAL

MGR

05/05/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date