

**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Mar 19, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # L02000022832**

1. Entity Name  
**ESCALADE DEVELOPMENT, L.L.C.**



Principal Place of Business <b>7964 NW 163RD TERRACE          MIAMI LAKES, FL 33016</b>	Mailing Address <b>7964 NW 163RD TERRACE          MIAMI LAKES, FL 33016</b>
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**DO NOT WRITE IN THIS SPACE**



01172007No Chg-LLC CR2E083 (11/05)

4. FEI Number <b>68-0520301</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00</b> Additional Fee Required	

6. Name and Address of Current Registered Agent

**VARELA, JULIO  
 7964 NW 163RD TERR  
 HIALEAH, FL 33016**

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00  
 Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM VARELA, JULIO 7964 NW 163RD TERRACE MIAMI LAKES, FL 33016</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 03/28/07-80067-013 50.00

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: *Julio Varela* Date: 3-15-07 (786) 229-6977  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Daytime Phone #