FILED
Apr 14, 2003 8:00 am
Secretary of State
02-17-2003 90004 042 ****50.00

2/1

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

2

DOCUMENT # L02000026245

1. Entity Name
BALLI DEVELOPMENT, LLC

Principal Place of Business	Mailing Address
8001 SW 84TH STREET, SUITE 115 MIAMI FL 33176	8001 SW 84TH STREET, SUITE 115 MIAMI FL 33176

2. Principal Place of Business	3. Mailing Address
8220 SW 93 Street	8220 SW 93 street.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Miami, FL	City & State: Miami, FL
Zip: 33156 Country: USA	Zip: 33156 Country: USA

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number: EDU 04-3716977 ☑ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ALOS & ASSOCIATES, P.A. 10271 SW 72ND STREET, SUITE 102D MIAMI FL 33173	Name: FRANCESCO Balli Street Address (P.O. Box Number is Not Acceptable) 8220 SW 93 street City: Miami FL Zip Code: 33156

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] DATE: 2/15/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Member/Member Francesco Balli, Consultacnion, Inc 8220 SW 93 St. Miami, FL 33156 (President) ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Member (1/3) Giorgio Balli 3360 Corraway, Suite 3 Miami, FL 33145 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Member Giorgio Loion Balli; GLB & Assoc. Inc. 3360 Corral way, Suite 5 Miami, FL 33145 (Vice President) ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Member (Secretary) (Treasurer) Giorgio Balli 3360 Corral way, Suite 5 Miami, FL 33145 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E083 (10/02)

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: SIGNATURE REQUIRED 2/15/03 (305) 431-6194
SIGNATURE AND TYPED OR PRINTED NAME OF MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #