2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Secretary of State DOCUMENT # L02000030900 03-17-2004 90274 044 ****50.00 1. Entity Name DEVELOPMENT INVESTORS, LLC Mailing Address Principal Place of Business 3440 HOLLYWOOD BOULEVARD, SUITE 360 3440 HOLLYWOOD BOULEVARD, SUITE 360 HOLLYWOOD, FL 33021 HOLLYWOOD, FL 33021 2. Principal Place of Business NE 2 3. Mailing Address 18861 NE 29th Suite, Apt. #, etc. 01092004 Cha-LLC CR2E083 (10/03) 4. FEI Number Applied For City & State UPONTO 59-3772607 Not Applicable Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent **ROUSSO, MARK E ESQ** Street Address (P.O. Box Number is Not Acceptable) 3440 HOLLYWOOD BLVD., STE 360 HOLLYWOOD, FL 33021 29th Ave # 900 33**%**0 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 KONZZO SIGNATURE Make check payable to Filing Fee is \$50.00 Due by May 1, 2004 Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 10. 9. Addition Change MGRM TITLE TITLE ☐ Delete NE 29th AVE # 400 NAME ROUSSO, MARK E NAME 3440 HOLLYWOOD BLVD., STE 360 STREET ADDRESS STREET ADDRESS CITY-ST-71P CITY-ST-ZIP HOLLYWOOD, FL 33021 Change Addition MGRM TITLE ☐ Delete TITLE OLIVIERI, RICARDO NAME NAME STREET ADDRESS 3440 HOLLYWOOD BLVD., STE 360 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD, FL 33021 MGRM- - -----TITI F . Delete TITLE VALENZUELO, PATRICO NAME STREET ADDRESS STREET ADDRESS 3440 HOLLYWOOD BLVD., STE 360 CITY-ST-ZIP HOLLYWOOD, FL 33021 CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE MGRM 29th AVE # 900 NAME NAME SEIGEL, BERNIE STREET ADDRESS 3440 HOLLYWOOD BLVD., STE 360 STREET ADDRESS CITY-ST-7IP HOLLYWOOD, FL 33021 CITY-ST-ZIP Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not gralify 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.

FILED

Mar 17, 2004 8:00 am