# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L03000002915

Entity Name: ASTOR DEVELOPMENT GROUP, LLC

FILED Jan 05, 2004 Secretary of State

Current Princi	pal Place of Business:	New Principal Place of Business

C/O ASTOR DEVELOPMENT GROUP LLC
2701 SW THIRD AVENUE
MIAMI, FL 331292335

2701 SW THIRD AVENUE
MIAMI, FL 331292335 US

### Current Mailing Address: New Mailing Address:

C/O ASTOR DEVELOPMENT GROUP LLC
2701 SW THIRD AVENUE
MIAMI, FL 331292335

2701 SW THIRD AVENUE
MIAMI, FL 331292335 US

FEI Number: 04-3736539 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

#### Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TORRES, PETER A
C/O ASTOR DEVELOPMENT GROUP LLC
2701 SW THIRD AVENUE
MIAMI, FL 331292335

TORRES, PETER A
C/O ASTOR DEVELOPMENT GROUP, LLC
2701 SW THIRD AVENUE
MIAMI, FL 331292335

MIAMI, FL 331292335

TORRES, PETER A
C/O ASTOR DEVELOPMENT GROUP, LLC
2701 SW THIRD AVENUE
MIAMI, FL 331292335

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: PETER TORRES 01/05/2004

Electronic Signature of Registered Agent Date

#### MANAGING MEMBERS/MEMBERS:

#### ADDITIONS/CHANGES:

() Delete MGRM ( ) Change (X) Addition RIONDA, JOAQUIN S MR. Name: Name: Address: Address: 2701 SW THIRD AVENUE MIAMI, FL 331292335 US City-St-Zip: City-St-Zip: ( ) Change (X) Addition Title: Title: MGRM ( ) Delete TORRES, PETER A MR. Name: Name: Address: Address: 2701 SW THIRD AVENUE City-St-Zip: City-St-Zip: MIAMI, FL 331292335 US Title: () Delete Title: MGRM ( ) Change (X) Addition TORRES, HENRY MR. Name: Name: Address: Address: 2701 SW THIRD AVENUE City-St-Zip: City-St-Zip: MIAMI, FL 331292335 US Title: () Delete Title: MGRM ( ) Change (X) Addition Name: Name: RIONDA, JOAQUIN C MR. Address: Address: 2701 SW THIRD AVENUE City-St-Zip: City-St-Zip: MIAMI, FL 331292335 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PETER A. TORRES MGRM 01/05/2004