


**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 07, 2008 08:00 A**  
**Secretary of State**

DOCUMENT # L03000013390 1. Entity Name COSTA BLANCA HOMES, L.L.C.	
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Principal Place of Business 209 WEST 21ST ST. HIALEAH, FL 33010	Mailing Address 209 WEST 21ST ST. HIALEAH, FL 33010
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**DO NOT WRITE IN THIS SPACE**



01242008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 55-0800248	Applied For 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

RODRIGUEZ, JOHN M ESQ  
 7600 WEST 20TH AVE., STE. 220  
 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)

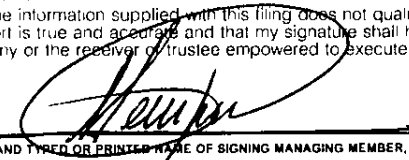
**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR SEMPERE, MIGUEL A 209 WEST 21ST ST. HIALEAH, FL 33010
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR SEMPERE, MERCEDES 209 WEST 21ST ST. HIALEAH, FL 33010
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR SEMPERE, JAIME 209 WEST 21ST ST. HIALEAH, FL 33010
TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	

UG0000984497  
 04/17/08-80045-023 138.75

**DO NOT WRITE IN THIS SPACE**

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:  Date: 4/3/08 Digital Photo # 205-899-4002

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