2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000015068

1. Entity Name

RIVER VILLAGE DEVELOPMENT L.L.C.

FILED Apr 06, 2007 08:00 A Secretary of State

Principal Place of Business

209 W 21ST STREET HIALEAH, FL 33010 U Mailing Address

209 W 21ST STREET HIALEAH, FL 33010

3010 US



01102007 No Chg-LLC

CR2E083 (11/05)

4. FE! Number 87-0698591 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BUSTAMANTE, WILLIAM M ESQ 7950 W FLAGLER ST, STE 106 MIAMI, FL 33144

SIGNATURE:

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 Signature, typed or printed name of registered agent and title if applicable		(NOTE: Registered Agent signature required when re-netating)	DATE
Filing Fee is \$50.00 Due by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SEMPERE, MIGUEL 209 WEST 21ST STREET HIALEAH, FL 33010		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		. 04	000000693865 1/16/07-80056-017 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT	WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS	SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained the 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 report or trusted empowered to execute this report as required by Chapter 608, Florida Statutes.			

NAME OF BIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE