## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **DOCUMENT # L03000028539**

1. Entity Name

ICE DEVELOPMENT GROUP, LLC



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

Principal Place of Business

200 SOUTH BISCAYNE BLVD.

2730 MIAMI, FL 33131 Mailing Address

200 SOUTH BISCAYNE BLVD.

2730

MIAMI, FL 33131



01292007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
06-1703365

Applied For
Not Applicable

5. Certificate of Status Desired

\$5.00 Additional
Fee Regulard

## DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

AREVALO, JORGE 200 SOUTH BISCAYNE BLVD. 2730 MIAMI, FL 33131

: IORGE

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: Recistered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00 Due by May 1, 2007 U00000632869 04/16/07-80017-009 50.00

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR AREVALO, JORGE 200 SOUTH BISCAYNE BLVD. SUITE 2730 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MITROPOULOS, TAKIS 4779 COLLINS AVE APT 1403 MIAMI BEACH, FL 33140
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR AREVALO, JORGE 7000 ISLAND BLVD. APT 1807 AVENTURA, FL 33160
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MITROPOULOS, TAKIS 4779 COLLINS AVENUE, SUITE 1403 MIAMI BEACH, FL 33140
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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: V