2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

Feb 14, 2005 08:00 AM Secretary of State DOCUMENT # L03000028628 PARĆO INDUSTRIALE TAMIAMI LLC Mailing Address icipal Place of Business 22290 SW 162 AVE. 22290 SW 162 AVE. GOULDS, FL 33170 GOULDS, FL 33170 02102005No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 06-1704766 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ARAZOZA & FERNANDEZ-FRAGA, P.A. 2100 SALZEDO ST., STE 300 DO NOT WRITE CORAL GABLES, FL 33134 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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS MGR IIIL CARDINAL DEVELOPMENT GROUP LLC NAME 22290 SW_162 AVE STREET ADDRESS CITY-ST-ZIP GOULDS, FL 33170 ∏2/15/05-8001/-004 55.00 MGR RVD DEVELOPMENT GROUP, LLC 4471 NW 36TH ST, STE 239 STREET ADDRESS CTTY · ST - ZIP MIAMI SPRINGS, FL 33166 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify 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 truetee empowered to execute this report as required by Chapter 608, Florida Statutes.

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

TITLE NAME STREET ADDRESS CMY-ST-ZIP mu

STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS

IN THIS SPACE

FILED