


# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jan 29, 2007 8:00 am**  
**Secretary of State**

01-29-2007 90140 038 \*\*\*\*50.00

<b>DOCUMENT # L03000035568</b> 1. Entity Name <b>C.B.Y. DEVELOPMENT, L.L.C.</b>					
Principal Place of Business <b>19901 E COUNTRY CLUB DR 504 AVENTURA, FL 33180 US</b>			Mailing Address <b>19901 E COUNTRY CLUB DR 504 AVENTURA, FL 33180 US</b>		
2. Principal Place of Business - No P.O. Box # <b>1160 E. Hallandale Beach Blvd</b> Suite, Apt. #, etc.		3. Mailing Address <b>1160 E. Hallandale Beach Blvd</b> Suite, Apt. #, etc.			
City & State <b>HALLANDALE FL</b>		City & State <b>HALLANDALE FL</b>		4. FEI Number <b>01-0797985</b>	
Zip <b>33309</b>		Country <b>Broward</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>BENTATA, ARIEL J 664 EAST HALLANDALE BEACH BLVD 33009 HALLANDALE BEACH, FL 33009</b>			7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) <b>1160 east Hallandale Beach Boulevard</b> City <b>HALLANDALE BEACH FL</b> Zip Code <b>33309</b>		
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 <u><i>Ariel Bentata</i></u> <b>Ariel Bentata HGRH</b> DATE <u><b>JAN. 22/07</b></u> <small>Signature, typed, or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$50.00 Due by May 1, 2007</b>		<b>Make check payable to Florida Department of State</b>			
<b>9. MANAGING MEMBERS/MANAGERS</b>			<b>10. ADDITIONS/CHANGES</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR INTERNATIONAL REALTY PROMOTERS GROUP, LLC 19901 E COUNTRY CLUB DR # 504 AVENTURA, FL 33180</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>1160 east. Hallandale Boulevard Hallandale Beach FL 33309</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: <u><i>Daniel Goldstein</i></u> <b>Daniel Goldstein</b> DATE <u><b>JAN. 22/07</b></u> <b>305-4690154</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Daytime Phone #</small>					