

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000035644

FILED
Jan 14, 2008
Secretary of State

Entity Name: DEVELOP MIAMI TRANSMISSION GROUP LLC

Current Principal Place of Business:

18318 SOUTH DIXIE HIGHWAY
MIAMI, FL 33157

New Principal Place of Business:

Current Mailing Address:

18318 SOUTH DIXIE HIGHWAY
MIAMI, FL 33157

New Mailing Address:

FEI Number: 41-2109558

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADMIRE, JOHN G ESQ
SULLIVAN ADMIRE & SULLIVAN
2511 PONCE DE LEON BLVD., STE. 320
CORAL GABLES, FL 331346069 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WILSON, MICHAEL W
Address: 13447 SW 144 TERR.
City-St-Zip: MIAMI, FL 33186

Title: MGR () Delete
Name: WILSON, WALLACE W
Address: 13447 SW 144 TERR.
City-St-Zip: MIAMI, FL 33186

Title: MGR () Delete
Name: WILSON, SHARON C
Address: 13447 SW 144 TERR.
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: WALLACE W WILSON

MGR

01/14/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date