

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000035644

**FILED**  
**Mar 15, 2010**  
**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:**

10890 SW 186 STREET  
36  
MIAMI, FL 33157

**Current Mailing Address:**

18318 SOUTH DIXIE HIGHWAY  
MIAMI, FL 33157

**New Mailing Address:**

10890 SW 186 STREET  
36  
MIAMI, FL 33157

**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  
Name: WILSON, MICHAEL W  
Address: 13447 SW 144 TERR.  
City-St-Zip: MIAMI, FL 33186

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

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

I hereby 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

03/15/2010

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