FILED Mar 18, 2005 8:00 am Secretary of State

| ANNUAL REPORT | 'ANY |
|---------------|------|
| | |

| DOCUMENT # L04000017190 1. Entity Name RD DEVELOPMENTS LLC | | | | | | 03-18-2005 9 | 90386 02 | .4 ****50 | 0.00 | |
|---|------------------|---|-----------------------------------|------------------|----------------------------|----------------------|---|-------------------------------|-------------------------|------------|
| Principal Place of Business GALLERIA PROFESSIONAL BLDG 915 MIDDLE RIVER DR SUITE 404 FORT LAUDERDALE, FL 33304 | | Mailing Address GALLERIA PROFESSIONAL BLDG 915 MIDDLE RIVER DR SUITE 404 FORT LAUDERDALE, FL 33304 | | | | 200223 | | | 11 1 | |
| 2. Principal Place of Business | | | 3. Mailing Address | | | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 02212005 | Chg-LLC | | 3 (10/03) | | | |
| City & State | | City & State | | 4. FEI Num 20 | | 0822794 | 1822794 N | | plied For Applicable | |
| Zip | | Country | Zip | Country | | | e of Status Desired | S5.00 Additional Fee Required | | |
| | 6. Name | and Address of Current I | Registered Agent | | | 7. Name an | d Address of New Re | gistered A | gent | |
| | | | | | Name | | | | | |
| LEBIDA, ROGER 13 WEST LAS OLAS BLVD FORT LAUDERDALE, FL 33301 | | | | | Street Address (| P.O. Box Numi | ber is Not Acceptable) | | | |
| 1 | | | | | City | | | FL | Zip Code | • ' |
| | | | the purpose of changing its | s register | ed office or register | red agent, or b | oth, in the State of Flor | | I miliar with, | and accept |
| SIGNATURE | M- | ROBEN US | | | | | | | | |
| Old I will on I | Signature, typed | or printed name of registered agent a | nd title if applicable. (NOT | E: Registere | d Agent signature required | d when reinstating) | | DATE | | |
| Filing Fee is \$50.00 Due by May 1, 2005 | | | | | | check pa Departme | yable to nt of State | | | |
| 9. | | MANAGING MEMBE | RS/MANAGERS | 10. | | | ADDITIONS/ | CHANGES | | |
| TITLE | MGRM | · · | Delete | TITE. | F | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | ☐ Change | ☐ Addition |
| NAME | LEBIDA, I | ROGER | L Deseto | NAM | 1 | | | | | |
| STREET ADDRESS | | | | - 6 | ET ADDRESS | | | | | |
| CITY-ST-ZIP | | | | -ST-ZIP | | | | | | |
| TITLE | MGRM | | ☐ Delete | TITL | E | | | | ☐ Change | ☐ Addition |
| NAME | MOSLEM | IAN, DAVOOD | | NAM | IE | | | | | |
| STREET ADDRESS | 23165 BC | CA CLUB COLONY CI | RCLE | 1 | EET ADDRESS | | | | | |
| CITY-ST-ZIP | BOCA RA | TON, FL 33433 | | CITY | '-\$T-ZIP | | | | | |
| TITLE | | | Delete | ŦΠL | | | | | Change | ☐ Addition |
| NAME | | | | NAM | | | | | | |
| STREET ADDRESS CITY-ST-ZIP | | 1 | | | EET ADORESS | | | - | | |
| TITLE | | | Detete | TITL | | | | | Change · | ☐ Addition |
| NAME | | | C Desete | NAM | l l | | | | | |
| STREET ADDRESS | | | | STR | EET ADDRESS | | | | | |
| CITY-ST-ZIP | | | | cm | /-\$1-ZIP | | | | | |
| TITLE | , | | ☐ Delete | ŤΠL | E . | | | | ☐ Change | ☐ Addition |
| NAME | | | | NAM | AE . | | • | | | |
| STREET ADDRESS | | | _ | | EET ADDRESS | | | | | |
| CITY-ST-ZIP | | | | | /-ST-ZIP | | | | ☐ Ch | □ Addition |
| TITLE | | • | . Delete | TITE | | | | | ☐ Change | Addition : |
| NAME STREET ADDRESS | | | | NAA STR | EET ADDRESS | | | | | ŀ |
| CITY-ST-ZIP | ` | | | | r-ST-ZIP | - | | | | |
| 44 11 | Cortifu that th | e information comblined with | this filing close not qualify for | | l | ection 119 07/3 | 3)(i), Florida Statutes 1 | further certi | ify that the in | nformation |
| 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 trustee empowered to execute this report as required by Chapter 608, Florida Statutes. | | | | | | | | | | |
| miniou madiny di indicatori di madica di inputita di disperi da logarida dy directori. | | | | | | | | | | |
| SIGNATURE: 12 ROGER LOBION 3/14/05 954 854 6198 | | | | | | | | | | |
| SIGNATURE: 1/30/66/ UOB/OF 3/17/0 757 071 0710 | | | | | | | | | | |