2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Sep 07, 2007 08:00 AN Secretary of State

DOCUMENT # L04000032792 BELLA HOMES OF FLORIDA, LLC Mailing Address Principal Place of Business 7560 S.W. 29TH STREET 7560 S.W. 29TH STREET MIAMI, FL 33155 MIAMI, FL 33155 08272007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 34-2000225 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ANSELMI, DORI DO NOT WRITE 7560 S.W. 29TH STREET MIAMI, FL 33155 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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent standaure regulated when reinstating) Filing Fee is \$50.00 Due by September 14, 2007 1100000773602 09/07/07-80006-003 55.00 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE ANSELMI, DORI NAME STREET ADDRESS 7560 S.W. 29TH STREET CITY-ST-ZIP MIAMI, FL 33155 TITLE NAME ANSELMI, HUMBERTO STREET ADDRESS 7560 S.W. 29TH STREET CHY-ST-ZIP MIAMI, FL 33155 TITE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADORESS CITY-ST-ZIP

11. I hereby certify that the information supplied with this filling 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 significant shall have the same legal effect as if made under eath; that I am a managing member or manager of the limited liability company of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

TITLE

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

ON PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

210

Daylane Phone #