

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000061385

Entity Name: PARADISIO IN FLORIDA LLC

FILED
Feb 09, 2007
Secretary of State

Current Principal Place of Business:

3333-24 VIRGINIA BEACH BLVD
VIRGINIA BEACH, FL 23452

New Principal Place of Business:

Current Mailing Address:

3333-24 VIRGINIA BEACH BLVD
VIRGINIA BEACH, FL 23452

New Mailing Address:

FEI Number: 34-2017649

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALDES-FAULI CORPORATE SERVICES, INC.
777 S. FLAGLER DRIVE, SUITE 500 EAST
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

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: CARINA DUNLAP

02/09/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GARCIA, EDWARD S
Address: 3333-24 VIRGINIA BEACH BLVD
City-St-Zip: VIRGINIA BEACH, FL 23452

Title: VP (X) Delete
Name: KILMER, ANDREA M
Address: 333324 VA BEACH BLVD
City-St-Zip: VIRGINIA BEACH, VA 23452

ADDITIONS/CHANGES:

Title: VP (X) Change () Addition
Name: KILMER, ANDREA M
Address: 3333-24 VIRGINIA BEACH BLVD
City-St-Zip: VIRGINIA BEACH, VA 23452

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ANDREA M. KILMER

VP

02/09/2007

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