2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000063441

1. Entity Name BIRD GROVE DEVELOPMENT, L.L.C.



FILED Feb 01, 2006 08:00 AM Secretary of State

Principal Place of Business

170 OCEAN LANE DRIVE #903 KEY BISCAYNE, FL 33149 Mailing Address

P.O. BOX 491345 KEY BISCAYNE, FL 33149



DO NOT WRITE IN THIS SPACE

01232006No Chg-LLC CR2E083 (11/05)

4.	FEI Number			Applied For
	20-1595408	- [_	Not Applicab
			_	

5. Certificate of Status Desired

\$5.00 Additional Fee Required

Davikne Phone #

6. Name and Address of Current Registered Agent

DEEB, KEVIN L ESQ 2350 CORAL WAY, SUITE 401 MIAMI, FL 33145-3536

DO NOT WRITE 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 life if applicable.	(NOTE. Registered Agent signature required when reinstating)	DATE -			
Filing Fee is \$50.00 Due by May 1, 2006						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS MGRM MARTINEZ, ALFONSO 170 OCEAN LANE DRIVE #903 KEY BISCAYNE, FL 33149		02/10/06-80087-002 50.00			
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
name street address city-st-zip		DO	NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN 7	THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
11. I hereby certify that the information supplied with this fitting 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 signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the						

MATED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE