

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000076253

Entity Name: LOHADAS DEVELOPMENT, LLC

FILED
Jan 30, 2007
Secretary of State

Current Principal Place of Business:

424 CALIGULA AVENUE
CORAL GABLES, FL 33146

New Principal Place of Business:

Current Mailing Address:

329 GRANELLO AVENUE
CORAL GABLES, FL 33146

New Mailing Address:

FEI Number: 20-1776339

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNITED STATES REGISTERED AGENTS, INC.
329 GRANELLO AVENUE
CORAL GABLES, FL 33146 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: MGRM () Delete
Name: SILVANA AND DAMIONE, LEWIS
Address: 424 CALIGULA AVENUE
City-St-Zip: CORAL GABLES, FL 33146

Title: MGR () Delete
Name: JOF 1107 CORP.,
Address: 329 GRANELLO AVENUE
City-St-Zip: CORAL GABLES, FL 33146

Title: MGR () Delete
Name: VIHAN CORPORATION,
Address: 329 GRANELLO AVENUE
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES:

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

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

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: SILVANA AND DAMIONE LEWIS

MGRM

01/30/2007

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