


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90064 019 ****50.00

DOCUMENT # L04000078905 1. Entity Name TUSCANY GROUP, LLC					
Principal Place of Business 6250 NORTH FEDERAL HWY. FT LAUDERDALE, FL 33308			Mailing Address 6250 NORTH FEDERAL HWY. FT LAUDERDALE, FL 33308		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent PENZO, LUIGI 4960 LEEWARD LANE DANIA BEACH, FL 33312				7. Name and Address of New Registered Agent Name DAISY PENZO Street Address (P.O. Box Number is Not Acceptable) 1235 SW 46TH AVE., # 710 City POMPANO BEACH FL Zip Code 33069	
4. FEI Number 20-1822230					
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required					
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: <i>[Signature]</i> (NOTE: Registered Agent signature required when reinstating) DATE:					
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PENZO, DAISY 4960 LEEWARD LN DANIA BEACH, FL 33312	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PENZO, LUIGI 4960 LEEWARD LN DANIA BEACH, FL 33312	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PENZO, LUIGI 4960 LEEWARD LN DANIA BEACH, FL 33312	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PENZO, LUIGI 4960 LEEWARD LN DANIA BEACH, FL 33312	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PENZO, LUIGI 4960 LEEWARD LN DANIA BEACH, FL 33312	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PENZO, LUIGI 4960 LEEWARD LN DANIA BEACH, FL 33312	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PENZO, LUIGI 4960 LEEWARD LN DANIA BEACH, FL 33312	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
11. I hereby certify that the information supplied with this filing 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 limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: <i>[Signature]</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE				04-26-07 Date Daytime Phone #	