

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000087423

Entity Name: ND REALTY, LLC

FILED
May 06, 2009
Secretary of State

Current Principal Place of Business:

3500 CORAL WAY
SUITE 102
MIAMI, FL 33145

New Principal Place of Business:

Current Mailing Address:

13245 NW 11 TERRACE
MIAMI, FL 33182

New Mailing Address:

13245 NW 11TH TER
MIAMI, FL 33182

FEI Number: 25-1906649 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

NEW DEVELOPMENTS LLC
13245 NW 11 TERRACE
MIAMI, FL 33182 US

Name and Address of New Registered Agent:

NEW DEVELOPMENTS LLC
13245 NW 11TH TER
MIAMI, FL 33182 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: _____

05/06/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: HENAO, CAROLINA
Address: 13245 NW 11 TERRACE
City-St-Zip: MIAMI, FL 33182

Title: MGRM () Delete
Name: HENAO, OSCAR I
Address: 13245 NW 11TH TERRACE
City-St-Zip: MIAMI, FL 33182

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HENAO, OSCAR
Address: 13245 NW 11TH TER
City-St-Zip: MIAMI, FL 33182

Title: MGR (X) Change () Addition
Name: HENAO, CAROLINA
Address: 13245 NW 11TH TER
City-St-Zip: MIAMI, FL 33182

I hereby certify that the information supplied with this filing does not qualify 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: OSCAR HENAO

MGRM

05/06/2009

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