2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000005417

2700 GLADES CIRCLE UNIT # 119

WESTON, FL 33327 US

Address:

City-St-Zip:

Entity Name: BELLAVISTA CONSTRUCTION GROUP, L.L.C.

FILED Jan 10, 2007 Secretary of State

| Current Principal Place of Business: | | New Principal Place | New Principal Place of Business: | |
|---|---|---|---------------------------------------|--|
| 2700 GLAI UINT #11 | DES CIRCLE 9 | | | |
| WESTON | , FL 33327 US | | | |
| Current Mailing Address: | | New Mailing Addres | New Mailing Address: | |
| 2700 GLAI UINT #11 | DES CIRCLE 9 | | | |
| | , FL 33327 US | | | |
| FEI Number | : 20-2188321 FEI Number Applied For (|) FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and | I Address of Current Registered Ager | nt: Name and Address o | of New Registered Agent: | |
| UNIT #119 | DES CIRCLE | | | |
| | named entity submits this statement for e of Florida. | the purpose of changing its registere | d office or registered agent, or both | |
| SIGNATUI | RE: | | | |
| | Electronic Signature of Registere | d Agent | Date | |
| MANAGING MEMBERS/MANAGERS: | | ADDITIONS/CHANGES: | ADDITIONS/CHANGES: | |
| Title: Name: Address: City-St-Zip: | MGRM () Delete VARGAS, GUILLERMO 2700 GLADES CIRCLE, UNIT #119 WESTON, FL 33327 US | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | MGRM () Delete VARGAS, ANDRES 2700 GLADES CIRCLE, UNIT #119 WESTON, FL 33327 US | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | MGRM () Delete VARGAS, DIANA 2700 GLADES CIRCLE, UNIT #119 WESTON, FL 33327 US | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: | MGRM () Delete VARGAS, OSCAR | Title: Name: | () Change () Addition | |

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.

Address:

City-St-Zip:

SIGNATURE: OSCAR VARGAS MGR 01/10/2007