


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)


192

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|---|---|
| DOCUMENT # L05000006453 |  |
| 1. Entity Name MASTER BUILDERS DEVELOPMENT, LLC | |

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 SEP 14 AM 10:01

| | |
|---|---|
| Principal Place of Business 1937 EAST ATLANTIC BLVD., STE. 9 POMPANO BEACH FL 33060 | Mailing Address 1937 EAST ATLANTIC BLVD., STE. 9 POMPANO BEACH FL 33060 |
|---|---|

PS 
03/22/06 90291 041 \$50.00
1st MOORE CR2E083 (10/05)

| | |
|---|--------------------|
| 2. Principal Place of Business | 3. Mailing Address |
| Suite, Apt. 2101 N Andrews Ave, Suite 107 | |
| City & State Wilton Manors, FL 33311 | |
| Zip | Country |

| | |
|---------------|--|
| 4. FEI Number | <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable |
|---------------|--|

| | |
|---|---------------------------------------|
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |
|---|---------------------------------------|

| | |
|---|--|
| 6. Name and Address of Current Registered Agent | |
| WAGNER ROSEN, EVE | |
| 2101 N Andrews Ave, Suite 403 | |
| Wilton Manors, FL 33311 | |

| | |
|--|----------|
| 7. Name and Address of New Registered Agent | |
| Name | |
| Street Address (P.O. Box Number is Not Acceptable) | |
| City | |
| FL | Zip Code |

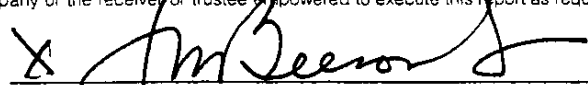
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2006

| 9. MANAGING MEMBERS / MANAGERS | | 10. ADDITIONS / CHANGES | |
|--|---|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Delete James M. Beeson Jr. 2101 N. Andrews Ave Ste 107 Wilton Manors, FL 33311 | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <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 Section 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:  **3/12/06** **971-563-8953**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE /Date Daytime Phone #

2072

2101 N Andrews Avenue
Suite 107
Wilton Manors, FL 33311
Phone: 954-563-8953, Fax: 954-563-8052

October 10, 2006

Florida Department of State
Division of Corporations
PO BOX 6327
Tallahassee, FL 32314

To Whom It May Concern:

I received the attached post card in the mail today, which informed Mooker Builders ~~Development, LLC~~ that it was non compliant with its 2006 annual report filing. We believe this was in error, as we did receive one notice for a correction and resubmitted it back within the time period requested. When I dialed your offices today I was told a second notice was mailed out for secondary corrections – this we never received.

We are submitting the paperwork again, if there are any problems please contact us at the numbers listed below.

Regards,



Cristen Bruning
Accounting Manager