2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000011964

1. Entity Name
URBAN PARTNERS DEVELOPMENTS L.L.C.

Principal Place of Business	Mailing Address
7003 NORTH WATERWAY DR. SUITE 219 MIAMI, FL 33155	7003 NORTH WATERWAY DR. SUITE 219 MIAMI, FL 33155

DO NOT WRITE IN THIS SPACE

04302007 No Chg-LLC CR2E083 (11/05)

4. FEI Number
20-2336107
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

NAVARRO, BERNARDO
7003 NORTH WATERWAY DR.
SUITE 219
MIAMI, FL 33155

DO NOT WRITE IN THIS SPACE

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	B.E.N. DEVELOPMENT CORP.
STREET ADDRESS	7003 NO. WATERWAY DRIVE, # 219
CITY-ST-ZIP	MIAMI, FL 33155
TITLE	MGR
NAME	CFA INVESTMENTS LLC
STREET ADDRESS	7003 NORTH WATERWAY DRIVE, #218
CITY-ST-ZIP	MIAMI, FL 33155
TITLE	MGR
NAME	CMHF URBAN INVESTMENTS LLC
STREET ADDRESS	3818 SW 152 PLACE
CITY-ST-ZIP	MIAMI, FL 33185
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000752070
05/21/07-80001-021 50.00

DO NOT WRITE IN THIS SPACE

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: _____ 4/30/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #