

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000035289

FILED
Mar 16, 2009
Secretary of State

Entity Name: MOSAIC DEVELOPMENT GROUP, LLC

Current Principal Place of Business:

20614 NW 11 AVE
MIAMI GARDENS, FL 33169

New Principal Place of Business:

Current Mailing Address:

20614 NW 11 AVE
MIAMI GARDENS, FL 33169

New Mailing Address:

FEI Number: 20-2656940

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILKEY, PHILOSSAINT
20614 NW 11 AVE
MIAMI GARDENS, FL 33169 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HOLDER, ALLAN S
Address: 20523 NW 11 AVE
City-St-Zip: MIAMI GARDENS, FL 33169

Title: MGRM () Delete
Name: PHILOSSAINT, WILKEY
Address: 20614 NW 11 AVE
City-St-Zip: MIAMI GARDENS, FL 33169

Title: MGRM () Delete
Name: PHILOSSAINT, LAUORE L
Address: 20614 NW 11 AVE
City-St-Zip: MIAMI GARDENS, FL 33169

Title: MGRM () Delete
Name: LAFORTUNE, NERE G
Address: 25472 SW 122 COURT
City-St-Zip: PRINCETON, FL 33032 US

Title: MGRM () Delete
Name: ALCE, HANS
Address: 149 NW 158 STREET
City-St-Zip: MIAMI, FL 33169 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ALLAN HOLDER

MGRM

03/16/2009

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