

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000046866

FILED  
Jan 10, 2007  
Secretary of State

Entity Name: VILLA DOLPHIN LLC

**Current Principal Place of Business:**

2700 GLADES CIRCLE  
SUITE 119  
WESTON, FL 33327

**New Principal Place of Business:**

**Current Mailing Address:**

2700 GLADES CIRCLE  
SUITE 119  
WESTON, FL 33327

**New Mailing Address:**

FEI Number: 20-2823100

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

VARGAS, GUILLERMO  
2700 GLADES CIRCLE  
SUITE 119  
WESTON, FL 33327 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: PRO-INVESTMENTS LLC,  
Address: 2700 GLADES CIRCLE # 119  
City-St-Zip: WESTON, FL 33327

Title: MGRM ( ) Delete  
Name: ASCARLO INVESTMENT G, ROUP LLC  
Address: 2549 JARDIN LANE  
City-St-Zip: WESTON, FL 33327

Title: MGRM ( ) Delete  
Name: ALVAREZ, FERNANDO  
Address: 3259 SOMMERSET  
City-St-Zip: WESTON, FL 33332

Title: MGRM ( ) Delete  
Name: ALVAREZ, CLAUDIA  
Address: 3259 SOMMERSET  
City-St-Zip: WESTON, FL 33332

**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:

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.

SIGNATURE: OSCAR VARGAS

MGR

01/10/2007

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