

**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Mar 03, 2006  
Secretary of State**

DOCUMENT# L05000049642

Entity Name: ROYAL PALM PROPERTIES & DEVELOPMENT GROUP, LLC

**Current Principal Place of Business:**

10340 AVENIDA DEL RIO  
DELRAY BEACH, FL 33446

**New Principal Place of Business:**

**Current Mailing Address:**

10340 AVENIDA DEL RIO  
DELRAY BEACH, FL 33446

**New Mailing Address:**

FEI Number:                      FEI Number Applied For (X)                      FEI Number Not Applicable ( )                      Certificate of Status Desired (X)

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

DUBROW DUKER & ASSOCIATES, PA  
5401 N. UNIVERSITY AVE  
SUITE 204  
CORAL SPRINGS, FL 33067 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: MGR ( ) Delete  
Name: MONTEMAYOR, ALEJANDRO  
Address: 10340 AVENIDA DEL RIO  
City-St-Zip: DELRAY BEACH, FL 33446

Title: MGR ( ) Delete  
Name: FUENTES, ALIDA  
Address: 10340 AVENIDA DEL RIO  
City-St-Zip: DELRAY BEACH, FL 33446

**ADDITIONS/CHANGES:**

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: ALEJANDRO MONTEMAYOR                      MGR                      03/03/2006

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