


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**

**Jan 16, 2007 08:00 AM  
Secretary of State**

<b>DOCUMENT # L05000059957</b> 1. Entity Name G.F.G. DEVELOPMENT, LLC	
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Principal Place of Business 7300 S.W. 93RD AVENUE SUITE 210 MIAMI, FL 33173 US	Mailing Address 7300 S.W. 93RD AVENUE SUITE 210 MIAMI, FL 33173 US
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**DO NOT WRITE IN THIS SPACE**



01032007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 05-0624321	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

AUGUSTO, GIL J  
7300 SW 93RD AVENUE  
SUITE 210  
MIAMI, FL 33173

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GIL IN THE GROVE, INC. 7300 SW 93RD AVENUE, SUITE 222 MIAMI, FL 33173
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR M TRADING & INVESTMENTS, INC. 1627 BRICKELL AVENUE, SUITE 2406 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR JAK CONSTRUCTION, INC. 2830 SW 110 AVENUE MIAMI, FL 33165
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

1000000586063  
01/16/07-80037-008 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:**  **Augusto J. Gil** 1/12/07 (305) 598-4002

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #