

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000082055

FILED
Jan 16, 2007
Secretary of State

Entity Name: QUALITY CENTER DEVELOPMENT, LLC

Current Principal Place of Business:

9600 NW 25TH ST
PH
MIAMI, FL 33172

New Principal Place of Business:

5201 BLUE LAGOON DR
SUITE 980
MIAMI, FL 33126

Current Mailing Address:

9600 NW 25TH ST
PH
MIAMI, FL 33172

New Mailing Address:

5201 BLUE LAGOON DR
SUITE 980
MIAMI, FL 33126

FEI Number: 16-1730764

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'NAGHTEN, JUAN T
2950 SW 27TH AVENUE, STE. 300
MIAMI, FL 33133 US

Name and Address of New Registered Agent:

GUTIERREZ, EDUARDO
10300 NW 19 ST
SUITE 104
MIAMI, FL 33178 US

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: EDUARDO GUTIERREZ

01/16/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ROSALES, KLEVER
Address: 260 CRANDON BLVD., STE. 52
City-St-Zip: KEY BISCAVNE, FL 33149

Title: MGR () Delete
Name: STEPNER, STEPHEN
Address: 5781 SW 91 ST
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ROSALES, KLEVER
Address: 584 FERNWOOD
City-St-Zip: KEY BISCAVNE, FL 33149

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: KLEVER ROSALES

MGR

01/16/2007

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