

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

2007 MAR 15 AM 10:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L05000100222

1. Entity Name
1020 LR LLC



Principal Place of Business

2700 GLADES CIRCLE
SUITE 111
WESTON, FL 33327

Mailing Address

2700 GLADES CIRCLE
SUITE 111
WESTON, FL 33327

DO NOT WRITE IN THIS SPACE



01102007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
20-3651534

Applied For

Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

NATHAN, RANDY J ESQ
7805 SW 6TH COURT
PLANTATION, FL 33324

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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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	FEMA GROUP, INC.
STREET ADDRESS	2700 GLADES CIRCLE SUITE 111
CITY-ST-ZIP	WESTON, FL 33327
TITLE	MGRM
NAME	BUILDING GROUP CORPORATION
STREET ADDRESS	2035 QUAIL ROOST DRIVE
CITY-ST-ZIP	WESTON, FL 33327
TITLE	MGRM
NAME	Azimuth Construction
STREET ADDRESS	2700 GLADES CIRCLE
CITY-ST-ZIP	WESTON FL 33327
TITLE	MGRM
NAME	Advance American Investment, LLC
STREET ADDRESS	101 E Commercial Bld.
CITY-ST-ZIP	Fort Lauderdale FL 33334
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

05/11/06 90019 034 \$155.00

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3/8/2007 (786) 273-8782

Date

Daytime Phone #