2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000100244

AKAYA PLANTATION PLAZA LLC



Principal Place of Business

2758 RACE TRACK RD.

STE #407

JACKSONVILLE, FL 32259

Mailing Address

136 BOWERY STE 203 NEW YORK, NY 10013

US

FILED Apr 03, 2007 8:00 am Secretary of State

04-03-2007 90120 037 ***150.00

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03082007 No Chg-LLC

CR2E083 (11/05)

4.	FEI Number		
	20-3608863		

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

-----6.-Name and Address of Current Registered Agent_

2758 RACE TRACK RD STE 407 JACKSONVILLE, FL 32259		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 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. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS MGR CHEN, HUA 2758 RACE TRACK RD STE 407 JACKSONVILLE, FL 32259			
TITLE NAME STREET ADDRESS CITY+ST-ZIP	MGRM CHEN, JIN 2758 RACE TRACK RD STE 407 JACKSONVILLE, FL 32259			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME				

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.

STREET ADDRESS CITY-ST-7IP

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

Daytime Phone #