

**2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L05000106952

**FILED**  
**Oct 22, 2007**  
**Secretary of State****Entity Name:** REAL DEAL, L.L.C.**Current Principal Place of Business:**2999 NE 191 STREET  
408  
AVENTURA, FL 33180**New Principal Place of Business:****Current Mailing Address:**2999 NE 191 STREET  
408  
AVENTURA, FL 33180**New Mailing Address:****FEI Number:** 20-3726932**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**SORSHER, ALEX  
2500-1 N STATE ROAD 7  
HOLLYWOOD, FL 33021 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: MGRM ( ) Delete  
Name: FRANZ, YANA  
Address: 2999 NE 191 STREET STE 408  
City-St-Zip: AVENTURA, FL 33180Title: MGRM ( ) Delete  
Name: AYDOGDU, RITA  
Address: 2999 NE 191 STREET STE 408  
City-St-Zip: AVENTURA, FL 33180Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:**ADDITIONS/CHANGES:**Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: MGRM ( ) Change (X) Addition  
Name: PRASIEVI, ALEXANDER  
Address: 2999 NE 191 STREET STE 408  
City-St-Zip: AVENTURA, FL 33180

I hereby certify that the information supplied with this filing does not qualify 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: ALEXANDER PRASIEVI

MGRM

10/22/2007

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