

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000108698

FILED  
Aug 31, 2006  
Secretary of State

Entity Name: LEBOLO DEVELOPMENT GROUP LLC

**Current Principal Place of Business:**

12188 ROCKLEDGE CIRCLE  
BOCA RATON, FL 33428

**New Principal Place of Business:**

**Current Mailing Address:**

12188 ROCKLEDGE CIRCLE  
BOCA RATON, FL 33428

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

LEOBOL, EMILIO  
12188 ROCKLEDGE CIRCLE  
BOCA RATON, FL 33428 US

**Name and Address of New Registered Agent:**

LEBOLO, EMILIO  
12188 ROCKLEDGE CIRCLE  
BOCA RATON, FL 33428 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: EMILIO LEBOLO

08/31/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MORA, MARTHA  
Address: 12188 ROCKLEDGE CIRCLE  
City-St-Zip: BOCA RATON, FL 33428

Title: MGRM ( ) Delete  
Name: LEBOLO, EMILIO  
Address: 12188 ROCKLEDGE CIRCLE  
City-St-Zip: BOCA RATON, FL 33428

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: EMILIO LEBOLO

VICE

08/31/2006

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