

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000029548

**FILED**  
**Mar 18, 2008**  
**Secretary of State**

**Entity Name:** D & D DEVELOPMENT GROUP, LLC

**Current Principal Place of Business:**

450 ALTON ROAD  
UNIT 1205  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

900 S MIAMI AVE  
SUITE 175  
MIAMI, FL 33130

**Current Mailing Address:**

450 ALTON ROAD  
UNIT 1205  
MIAMI BEACH, FL 33139

**New Mailing Address:**

900 S MIAMI AVE  
SUITE 175  
MIAMI, FL 33130

**FEI Number:** 20-5839741

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

GARCIA, EDUARDO J  
GROVE PROFESSIONAL BUILDING SUITE 300  
2950 SW 27TH AVE.  
MIAMI, FL 33133 US

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

BENOLIEL, JEAN DAVID  
900 S MIAMI AVE  
SUITE 175  
MIAMI, FL 33130 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: JEAN DAVID BENOLIEL

03/18/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: BENOLIEL, JEAN-DAVID  
Address: 450 ALTON ROAD UNIT 1205  
City-St-Zip: MIAMI BEACH, FL 33139

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: BENOLIEL, JEAN-DAVID  
Address: 900 S MIAMI AVE SUITE 175  
City-St-Zip: MIAMI BEACH, FL 33130

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: JEAN- DAVID BENOLIEL

MBR

03/18/2008

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