2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

Apr 15, 2008 8:00 am Secretary of State **DOCUMENT # L06000075387** 04-15-2008 90102 013 ***138.75 OUR PROMISE LAND III, LLC Principal Place of Business Mailing Address 50002964 6133 NW 181 TERCIR SOUTH P.O. BOX 170665 MIAMI, FL 33015 MIAMI, FL 33017 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01092008 Chg-LLC CR2E083 (12/06) City & State City & State 4. FEI Number Applied For 20-5396691 Not Applicable Zip Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CLANTON, RHONDA Street Address (P.O. Box Number is Not Acceptable) 6133 NW 181 TERCIR SOUTH MIAMI, FL 33015 Zip Code City FI 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 FILE NOW!!! FEE IS \$138.75 Make check payable to After May 1, 2008 Fee will be \$538.75 Florida Department of State MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES MGR TITLE ☐ Delete TITI F ☐ Change ■ Addition CARBALLO, ARIEL NAME NAME STREET ADDRESS 15705 NW 16TH CT STREET ADDRESS PEMBROKE PINES, FL 33028 CITY-ST-ZIP CITY-ST-71P MGRM TITLE ■ Delete TITLE ☐ Change Addition NAME CRABALLO, FRANCES NAME STREET ADDRESS 15705 NW 16TH COURT STREET ADDRESS CITY-ST-ZIP PEMBROKE PINES, FL 33028 CITY-ST-ZIP MGRM TITLE ☐ Delete TITLE Change Addition NAME AYALA, RONALD J NAME STREET ADDRESS 5720 NW 194TH TERRACE STREET ADDRESS CITY-ST-7IP HIALEAH, FL 33015 CITY-ST-ZIP MGRM TITI F ☐ Delete TITI F ☐ Change ☐ Addition DIAZ-AYALA, ITZA L NAME NAME STREET ADDRESS **5720 NW 194TH TERRACE** STREET ADDRESS CITY-ST-ZIP HIALEAH, FL 33015 CITY-ST-ZIP MGRM TITLE ☐ Delete TITLE ☐ Change ☐ Addition GORDILLA RICHARD B NAME NAME 761 NW 162ND AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PEMBROKE PINES, FL 33028 CITY-ST-ZIP TITLE **MGRM** ☐ Delete ☐ Change Addition GORDILLO, ZENITH E NAME NAME STREET ADDRESS 761 NW 162ND AVE STREET ADDRESS PEMBROKE PINES, FL 33028 CITY-ST-ZIP CITY-ST-ZIP 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 repeiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

FILED

ATTACHMENT 50002964 L06000075387

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