2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

Jul 20, 2007 8:00 am DOCUMENT # L06000117770 **Secretary of State** P&G DEVELOPMENT, LLC 05-14-2007 90366 040 ****50.00 Principal Place of Business Mailing Address 9090 SOUTH DADELAND BLVD. 9090 SOUTH DADELAND BLVD. 30011245 MIAMI, FL 33156 MIAMI, FL 33156 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07062007 Chg-LLC CR2E083 (12/06) City & State City & State 4. FEI Number Applied For 26-0338925 Not Applicable Zio Country Zip 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 STEARNS WEAVER MILLER WEISSLER ALHADEFF & Street Address (P.O. Box Number is Not Acceptable) SITTERSON, P.A., C/O RICHARD E. SCHATZ 150 WEST FLAGLER STREET, SUITE 2200 MIAMI, FL 33130 City Zio Code 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 Make check payable to Due by September 14, 2007 Florida Department of State 9. MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 10. TITLE TITLE ☐ Chance ■ Addition Managing Member NAME NAMÉ Luis A. Pulenta STREET ADDRESS STREET ADDRESS 9090 S. Dadeland Blvd., Suite 210 Miami, Fl 33156 CITY-ST-ZIP CITY-ST-ZIP TITLE Managing Member ☐ Delete TITLE Change ☐ Addition Ricardo Glas NAME STREET ADDRESS 9090 S. Dadeland Blvd., Suite 210 STREET ADDRESS CITY-ST-ZIP Miami, Fl 33156 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

FILED

SIGNATURE: LUIS A. FULENTA 07/16 2007 305-671-5114

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date DayLing Phone #

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.

2007 LIMITED LIABILITY COMPANY

5/14/2007-90366-040-\$50.00-\$50.00

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DOCUMENT # L06000117770 1. ENLISY NAME PAG DEVELOPMENT, LLC							01194	
Principal Place 9090 SOUTH MIAMI, FL 33	DADELAND BLVD.	Meling Address 9090 South Dadeland Blvd. Miami, Fl. 33155			<i>50</i> 1	01174	5	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address						
Suite, Apt. 4, etc.		Suite, Apr. #, etc.		02062007	Chg-LLC	CR2E083 (12		
City & State		City & State		1.26-03	38925		Applied For Not Applicable	
Z1p	Country	Zip Country			5. Certificate of Status Desired 55.00 Additional Fee Required			
8. Name and Address of Current Registered Agent					7. Name and	Address of New R	egistered Agent	
STEARNS SITTERSO 150 WEST MIAMI, FL		\		P.O. Box Numb	er is Not Acceptable	»)		
William, FC	30130		City				FL Zi	Code
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 Specime, typed or private name of registrated agent and lafe if applicable (INDTE: Registrated Agent algorite algorite algorite and refer improved when reministring). OATE								
Filing Fee is \$50,00 Due by May 1, 2007			, , 				e check payable Department of	
TITLE	MANAGING MEMBER	S/MANAGERS	10.			ADDITIONS/	CHANGES C	ange 🔲 Addition
HAME STREET ADDRESS CITY-ST-ZIP	9090 S Dadeland Blvd, Suite 210 Miami, FL 33156			25				30 B 4010
HAME STREET ACCRESS CITY-ST-ZP	Ricardo Glas Dotte 9090 S Dadeland Blvd, Suite 210 Miami, FL 33156		TITLE HAME STREET ADDRE CUY-ST-IP	53-			_ Ch	angs Addition
TITLE NAME STREET ADDRESS CITY-ST-29		☐ Debte	TITLE HAME STREET ADDRE CITY-ST-ZIP	25	_		□ Ch	ange Addition
TITLE NAME STREET ADDRESS CRY+S1+2P		☐ Delete	TITLE HAME STREET ADDRE CITY-ST-ZIP	z			_ ch	ange 🔲 Addition
TITLE MAME STREET ADDRESS CETY-57-ZIP		Celcte	CUA-21-50- 21WEEL VOOWE HAVE	35			□ ch	ange 🔲 Addition
TITLE NAME STREET ADDRESS (CITY-ST-ZIP		□ Delicie	HIRE NAME STREET ACCINE CITY-ST-ZIP	22			□ Ch	ange 🗌 Addition
11. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I surface certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as 4 media under certify that I am a managing member or manager of the limited liability company or the receiver or trystee empowered of execute this ignored by Chapter 608, Florida Statutes. SIGNATURE								
JIGNAI	UKE.	AND THE MANAGEMENT MEMORY STATES			- TATM!		Deter De	