

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000011068

FILED
Apr 30, 2008
Secretary of State

Entity Name: CASANOVA DEVELOPMENT GROUP, LLC

Current Principal Place of Business:

17100 N BAY RD
UNIT # 1206
SUNNY ISLES, FL 33160 US

New Principal Place of Business:

Current Mailing Address:

17100 N BAY RD
UNIT # 1206
SUNNY ISLES, FL 33160 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VARGAS, CARLOS J JR.
17100 N BAY RD
UNIT # 1206
SUNNY ISLES, FL 33160 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: MGR () Delete
Name: GRIJALVA, LUIGI
Address: 15271 SW 18 STREET
City-St-Zip: MIRAMAR, FL 33027 US

Title: MGRM (X) Delete
Name: VARGAS, CARLOS A SR.
Address: 2623 WEST 68TH PLACE
City-St-Zip: HIALEAH, FL 33016 US

Title: MGRM (X) Delete
Name: VARGAS, NORMA
Address: 2623 WEST 68TH PLACE
City-St-Zip: HIALEAH, FL 33016 US

ADDITIONS/CHANGES:

Title: PD (X) Change () Addition
Name: VARGAS, CARLOS
Address: 17100 N BAY RD #1206
City-St-Zip: SUNNY ISLES BEACH, FL 33160

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 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: CARLOS VARGAS

PD

04/30/2008

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