

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 17, 2008 8:00 am
Secretary of State

03-20-2008 90181 009 ***138.75

DOCUMENT # L07000086651 1. Entity Name DEVELOPER DIRECT, LLC																											
Principal Place of Business C/O RONNY J. HALPERIN, P.A. 17961 BISCAYNE BLVD. SUITE B-1 AVENTURA, FL 33160		Mailing Address C/O RONNY J. HALPERIN, P.A. 17961 BISCAYNE BLVD. SUITE B-1 AVENTURA, FL 33160																									
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country																									
4. FEI Number 01172008 Chg-LLC CR2E083 (12/06)		☒ Applied For ☐ Not Applicable																									
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required		6. Name and Address of Current Registered Agent RONNY J. HALPERIN, P.A. 17961 BISCAYNE BOULEVARD SUITE B-1 AVENTURA, FL 33160																									
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip 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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____																									
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		Make check payable to Florida Department of State																									
9. MANAGING MEMBERS/MANAGERS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">MGRM</td> <td style="width: 20%; text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>BURNARD, LOUISE</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>17961 BISCAYNE BOULEVARD, STE B-1</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>AVENTURA, FL 33160</td> <td></td> </tr> </table>		TITLE	MGRM	☐ Delete	NAME	BURNARD, LOUISE		STREET ADDRESS	17961 BISCAYNE BOULEVARD, STE B-1		CITY-ST-ZIP	AVENTURA, FL 33160		10. ADDITIONS/CHANGES <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;"></td> <td style="width: 20%; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>		TITLE		☐ Change ☐ Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 118, 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.																											
SIGNATURE: <u><i>Louise Burnard</i></u> <u>March 16th 08</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #																											

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