

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000123836

FILED  
Apr 08, 2008  
Secretary of State

Entity Name: DEVELOPING DREAMS LLC

**Current Principal Place of Business:**

3800 GALT OCEAN DRIVE  
804  
FORT LAUDERDALE, FL 33308 US

**New Principal Place of Business:**

**Current Mailing Address:**

3800 GALT OCEAN DRIVE  
804  
FORT LAUDERDALE, FL 33308 US

**New Mailing Address:**

5825 COLLINS AVENUE  
11D  
MIAMI BEACH, FL 33140 US

FEI Number: 45-0592626

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

COSTABEL, ATTILIO M  
601 BRICKELL KEY DRIVE  
705  
MIAMI, FL 33131 US

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

SILVIA, FERRI  
3800 GALT OCEAN DRIVE  
804  
MIAMI, FL 33308 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: SILVIA FERRI

04/08/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: FERRI, SILVIA  
Address: 3800 GALT OCEAN DRIVE  
City-St-Zip: FT LAUDERDALE, FL 33308 US

**ADDITIONS/CHANGES:**

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: SILVIA FERRI

MGMR

04/08/2008

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