
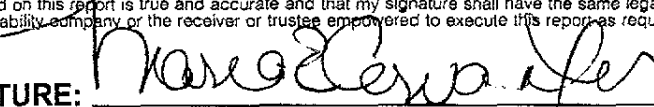


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 24, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L99000008565</b> 1. Entity Name ROYAL EXPLORER DEVELOPMENT, L.L.C.		
Principal Place of Business 4850 S.W. 72ND AVENUE MIAMI, FL 33155	Mailing Address 4850 S.W. 72ND AVENUE MIAMI, FL 33155	
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent  CERVANTES, PATRICIO 4850 S.W. 72ND AVENUE MIAMI, FL 33155		<b>DO NOT WRITE IN THIS SPACE</b>
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
Filing Fee is \$50.00 Due by May 1, 2006		
9. MANAGING MEMBERS/MANAGERS		<b>DO NOT WRITE IN THIS SPACE</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CERVANTES, PATRICIO 4850 S.W. 72ND AVENUE MIAMI, FL 33155	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KREUTZBERGER, PATRICIO 4850 S.W. 72ND AVENUE MIAMI, FL 33155	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS 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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.		
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE		Date: 4-20-06 Daytime Phone #: 305661-1516



04202006No Chg-LLC

CR2E083 (11/05)

4. FEI Number  
65-0965673

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

U000000530453  
05/05/06-80116-006 50.00