### **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

#### DOCUMENT # L00000007026

1. Entity Name

THIRTY FIVE NORTH MIAMI, L.L.C.



Principal Place of Business

2 NE FIRST ST MIAMI, FL 33132 Mailing Address 2 NE FIRST ST

MIAMI, FL 33132

# **FILED** Apr 28, 2006 8:00 am Secretary of State

04-28-2006 90019 008 \*\*\*150.00



### DO NOT WRITE IN THIS SPACE

03212006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 65-1018260

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

KATES, LESTER G ESQ 807 GABLES INTERNATIONAL PLAZA 2655 LEJEUNE ROAD CORAL GABLES, FL 33134

## DO NOT WRITE IN THIS SPACE

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 / Due by May 1, 2006			
9. ·	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GOMEZ, ELIZABETH HORTA 2 NE. 1ST ST MIAMI, FL 33132		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HORTA, DELIA 2 NE FIRST ST MIAMI, FL 33132		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT	WRITE
TITLE NAME STREET ADDRESS CITY-S1-ZIP		IN THIS	SPACE
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 those empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR BER, OR AUTHORIZED REPRESENTATIVE