


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2006 08:00 A
Secretary of State

| | |
|---|---|
| DOCUMENT # L01000003258 1. Entity Name GILCO REALTY, L.C. |  |
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| Principal Place of Business 18001 COLLINS AVENUE 31ST FLOOR SUNNY ISLES BEACH, FL 33160 | Mailing Address 18001 COLLINS AVENUE 31ST FLOOR SUNNY ISLES BEACH, FL 33160 |
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04282006No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

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| 4. FEI Number 80-0030727 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required | |

6. Name and Address of Current Registered Agent

FIELDSTONE, RONALD R
201 ALHAMBRA CIRCLE
SUITE 601
CORAL GABLES, FL 33134

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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 _____
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 DEZER, MICHAEL 8701 COLLINS AVENUE MIAMI BEACH, FL 33154 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGRM DEZERTZOV, NEOMI 18001 COLLINS AVE SUNNY ISLES BEACH, FL 33160 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGR DEZER, GIL 18001 COLLINS AVENUE, 31ST FLOOR SUNNY ISLES BEACH, FL 33160 |
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| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |

U00000551319
05/13/06-80097-001 50.00

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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: *L. Salmon* L. Salmon 4/28/06 212 9291285
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #