


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2006 8:00 am
Secretary of State

04-27-2006 90017 028 ****50.00

DOCUMENT # L02000007503 *Inv #*

1. Entity Name
 2060 DEVELOPMENT, LLC



Principal Place of Business 1900 SUNSET HARBOUR DRIVE SUITE 1 MIAMI BEACH, FL 33139	Mailing Address 1900 SUNSET HARBOUR DRIVE SUITE 1 MIAMI BEACH, FL 33139
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DO NOT WRITE IN THIS SPACE



04172006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 04-3630145	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

WOOD, RICHARD A ESQ.
 100 S.E. 2ND STREET
 17TH FLOOR
 MIAMI, FL 33131

DO NOT WRITE IN THIS SPACE

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 reinstating) DATE _____

**Filing Fee is \$50.00
 Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR TURKIN, JOHN A 1900 SUNSET HARBOR DR #1 MIAMI BEACH, FL 33139
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SEIKALY, RONY 27 E DILIDO DR MIAMI BEACH, FL 33139
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DELETE

DO NOT WRITE IN THIS SPACE

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]* **4/19/06** (305) 672-0702

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #