2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L02000013448

1. Entity Name
GOLDMAN DEVELOPMENT, LLC

Principal Place of Business	Mailing Address
804 OCEAN DRIVE 2ND FL MIAMI BEACH, FL 33139	804 OCEAN DRIVE 2ND FL MIAMI BEACH, FL 33139

DO NOT WRITE IN THIS SPACE

01162006 No Chg-LLC   CR2E083 (11/05)

4. FEI Number		Applied For
20-1647782		Not Applicable

5. Certificate of Status Desired $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

LEVINSON, EDWARD E
407 LINCOLN ROAD PH-SE
MIAMI BEACH, FL 33139

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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	MGRM
NAME	GOLDMAN, CHARLES J
STREET ADDRESS	804 OCEAN DRIVE, 2ND FL
CITY-ST-ZIP	MIAMI BEACH, FL 33139
TITLE	MGRM
NAME	GOLDMAN, ANTHONY R
STREET ADDRESS	804 OCEAN DRIVE, 2ND FL
CITY-ST-ZIP	MIAMI BEACH, FL 33139
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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