## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE: IRWIN KIRSHER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

## FILED Mar 07, 2005 08:00 AM Secretary of State

03/04/05 (954)499-66**77** 

| ANNUAL REPORT  |   |   |                   |   | Wiar 0/, 2005 08:00  |  |
|--|---|---|-------------------|---|--|--|
|  | MENT # L0200  | 00033503  |                   |   | Secreta  | ry of State                              |
| 1. Entity Nan<br>WPB BUI   | ne<br>ILDING, LLC   | 5   |                   |   |  |  |
|  | ce of Business<br>ERCE PARKWAY<br>L 33025                         | Mailing Address<br>3501 COMMEI<br>MIRAMAR, FL   | RCE PARKWAY       |   |  |  |
|  |   |   |                   |   |  |  |
| DO NOT WRITE IN THIS SPACE   |   |   |                   | 02182005No Chg-LLC CR2E08               | 33 (10/03)   |  |
|  |   |   |                   | CE                                      | 4. FEI Number<br>36-3196821  | Applied For Not Applicable               |
|  |   |   |                   |   |  | 5.00 Additional<br>se Required           |
|  | 6. Name and Address of  | f Current Registered Agent  | ···               | 1                                       |  |  |
| KIRSNER, IRWIN<br>3501 COMMERCE PARKWAY  |   |   | DO NOT WRITE      |   |  |  |
| MIRAMAR  | R, FL 33025   |   |                   |   | 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. Tam 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)  OATE  |   |   |                   |   |  |  |
| Fi<br>D  | iling Fee is \$50.00<br>ue by May 1, 2005                         | istered event and me is appricable  | tivo is uspisione | o Agent Signature required              | when reinstaingl OATE  |  |
| 9.   | MAÑAĞIN   | G MEMBERS/MANAGERS  |                   | <u> </u>                                |  |  |
| TITLE NAME STREET ADDRESS CITY-ST ZIP  | MGR<br>KIRSNER, IRWIN<br>3501 COMMERCE PKW<br>MIRAMAR, FL 33025   | γ.  |                   | -                                       |  |  |
| TITLE<br>NAME<br>STREE! ADDRESS<br>CITY-ST ZIP   | MGR<br>KIRSNER, VICKI L<br>3501 COMMERCE PKW<br>MIRAMAR, FL 33025 | γ.  |                   | - · · · · · · · · · · · · · · · · · · · | U00000254930<br>03/07/05-80092-0   | 022 50.00                                |
| TITLE<br>NAME<br>STREF) ADDRESS<br>CITY-ST ZIP   |   |   |                   |   | DO NOT WRITE   |  |
| TITLE NAME STREET ACCIRESS CITY-SI-ZIP   |   |   |                   |   | IN THIS SPACE  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  |   |   |                   |   |  |  |
| TITLE<br>NAME<br>STREET ADDRESS  |   |   |                   | _                                       |  |  |
| ındicated  | on this report is true and acc                                    | plied with this filing does not our<br>urate and that my signature short<br>or trustee empowered to execute | all have the same | e legal effect as if m                  | ction 119.07(3)(i), Florida Statutes. I further certify<br>ade under oath, that I am a managing member i<br>er 608, Florida Statutes | r that the information or manager of the |