


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 14, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000017206		
1. Entity Name WATERVIEW MANAGEMENT, LLC		
Principal Place of Business ATTN: HILDA FISH 6640 ALLISON ROAD MIAMI BEACH, FL 33141	Mailing Address ATTN: HILDA FISH 6640 ALLISON ROAD MIAMI BEACH, FL 33141	



08032006 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 02-0690403	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

OSMAN, ALYSON P ESQ.
 ONE DATRON CENTER, SUITE 402
 9100 SOUTH DADELAND BLVD
 MIAMI, FL 33156

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$50.00
Due by September 6, 2006

UN00000574287
 08/14/06-80007-018 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FISH, HILDA A 6640 ALLISON RD MIAMI BEACH, FL 33141
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FISH, BRUCE 6640 ALLISON RD MIAMI BEACH, FL 33141
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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: *Bruce Fish Mgrm* Date: *8/14/06* 305-592-4545 Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING/MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE