
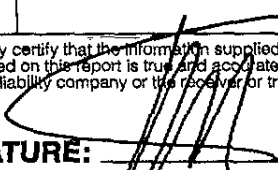


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 04, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000020481 1. Entity Name AMAS DEVELOPMENT - HIDDEN HARBOR, LLC		
Principal Place of Business 1103 EAST LAS OLAS BLVD., STE. 200 FT LAUDERDALE, FL 33301		Mailing Address 1103 EAST LAS OLAS BLVD., STE. 200 FT LAUDERDALE, FL 33301
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent SHIFF, MICHAEL A 1103 EAST LAS OLAS BLVD., STE. 200 FT LAUDERDALE, FL 33301		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when resigning)</small> DATE _____		
Filing Fee is \$50.00 Due by May 1, 2005		
9. MANAGING MEMBERS/MANAGERS		DO NOT WRITE IN THIS SPACE
TITLE	MGRM	
NAME	SHIFF, MICHAEL A	
STREET ADDRESS	1103 E. LAS OLAS BLVD. #200	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33301	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: 		2/22/05 954-463-8900
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		<small>Date Daytime Phone #</small>



01052005No Chg-LLC

CR2E083 (10/03)

4. FEI Number 58-2675463	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required