

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 10, 2006 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**



01192006 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number **58-2675463** Applied For
 Not Applicable

5. Certificate of Status Desired **\$5.00** Additional Fee Required

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

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**

02/22/06-80006-016 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SHIFF, MICHAEL A 1103 E. LAS OLAS BLVD. #200 FORT LAUDERDALE, FL 33301
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**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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

[Handwritten Signature]
 02/26/06