2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000057366

1. Entity Name 210 LLC

TITLE NAME STREET ADDRESS

NAME STREET ADDRESS

CITY-\$1-ZIP

CITY-ST-ZIP TITLE

FILED Jan 23, 2006 08:00 AN Secretary of State

Principal Place of Business

C/O GEORGE GREENBERG 110 RUSSLYN DRIVE WEST PALM BEACH, FL 33405 Mailing Address

C/O GEORGE GREENBERG 110 RUSSLYN DRIVE WEST PALM BEACH, FL 33405



DO NOT WRITE IN THIS SPACE

01112006No Chg-LLC CR2E083 (11/05)

4. FEI Number Applied For 59-3780040 Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GREENBERG, GEORGE 110 RUSSLYN DRIVE WEST PALM BEACH, FL 33405

DO NOT WRITE IN THIS SPACE

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8. The above the obligat	named entity submits this statement for the purpose of charlions of registered agent.	unging its registered office or registered agent, or bot	th, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE. Registered Agent signature regulted when reinstating)	DATE
Fi D	iling Fee is \$50.00 ue by May 1, 2006 MANAGING MEMBERS/MANAGERS	·	
TIITE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GREENBERG, GEORGE 110 RUSSLYN DRIVE WEST PALM BEACH, FL 33405		1800000394544 01726706-80014-024 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			

DO NOT WRITE IN THIS SPACE

CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	

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:	Plong	, 1	reenbeu	7
SIGHATURE AN	TYPED OR PRINTED	NAME OF SIG	NING MANAGING MEMBE	R, OR AUTHORIZED REPRESENTATIVE