2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 28, 2006 8:00 am Secretary of State

DOCUMENT # L0400005068 1. Entity Name ONE RIVERVIEW PROMENADE, LLC								(04-28-2006 9	90033 031 ***	*50.00
Principal Place of Business 155 S MIAMI AVE, PH II-A MIAMI, FL 33130			Mailing Address 155 S MIAMI AVE, PH II-A MIAMI, FL 33130				111				B1 (B188) 12 (BB1
2. Principal Place of Business			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.				0421	2006 (Chg-LLC	CR2E083 (11/	05)
City & State			City & State					Number -102560)7		Applied For Not Applicable
Zip			Zip	Country			5. Cer	tificate of S	tatus Desired	□ \$5.00 Fee Req	Additional uired
	6. Name	and Address of Current	Registered Agent		Nama		7. Nan	ne and Ade	iress of New Reg	gistered Agent	
SIRLIN, DANIEL 155 SOUTH MIAMI AVENUE PENTHOUSE 2A			Name Street Addr		ddress (F	(P.O. Box Number is Not Acceptable)					
MIAMI, FL											
Don.					City					FL Zip '	Code
8. The above the obligat	named entititions of regist		or the purpose of changing its	register	ed office or	registere	ed agent	, or both, in	the State of Flori	da. I am familiar v	ith, and accept
SIGNATURE .	Signature, typed	by/Dirtitled name of registered agent	and title if applicable. (NOT	E: Registere	d Agent signat	re required on	when reinst	ating)	4.21	DATE DATE	
Filing Fee is \$50.00 Due by May 1, 2006							Make check payable to Florida Department of State				
Fi D	iling Fee i ue by Ma	is \$50.00 y 1, 2006									
9.	iling Fee ue by Ma	Is \$50.00 y 1, 2006 MANAGING MEMB	ERS/MANAGERS	10.						Department of S	
	D SIRLIN, D	MANAGING MEMB DANIEL TH MIAMI AVENUE	ERS/MANAGERS Delete	TITL NAM STRE		-			Florida I	Department of S	tate
9. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE	D SIRLIN, D 155 SOU' MIAMI, FI	MANAGING MEMB DANIEL TH MIAMI AVENUE L 33130		TITL NAM STRE	EET ADORESS -ST-ZIP				Florida I	Department of S	ge Addition
9. TITLE NAME STREET ADDRESS CITY-SI-2IP	D SIRLIN, D 155 SOU' MIAMI, FI D KRINSKY	MANAGING MEMB DANIEL TH MIAMI AVENUE L 33130 T, JEFF TH MIAMI AVENUE	☐ Delete	TITLI NAM STRE CITY TITLI NAM STRE	EET ADDRESS '-ST-ZIP	155	s.	Miam	Florida I	Department of \$ HANGES Char	ge Addition Ge Addition
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implication 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 limited liability company or the receive for trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: AND TYPED OR PRINTED NAME OF BIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4-16.06

305-374-7075