


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 05, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000034743

1. Entity Name
V2 FLORIDA REALTY, LLC



Principal Place of Business 1304 NORTH BROAD STREET HILLSIDE, NJ 07205 US	Mailing Address 1304 NORTH BROAD STREET HILLSIDE, NJ 07205 US
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03292006 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 27-0089495	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

LENOFF, STEVEN
1761 WEST HILLSBORO BOULEVARD
SUITE 405
DEERFIELD BEACH, FL 33442

**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 _____ (NOTE: Registered Agent signature required when re-creating)
Signature, typed or printed name of registered agent and title if applicable. DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

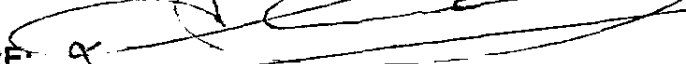
9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DANA, VITTORIO 1304 NORTH BROAD STREET HILLSIDE, NJ 07205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HARA, VICTOR 1304 NORTH BROAD STREET HILLSIDE, NJ 07205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM EL MANN, JOSEPH 1304 NORTH BROAD STREET HILLSIDE, NJ 07205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ELMANN, CHARLES 1304 NORTH BROAD STREET HILLSIDE, NJ 07205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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04/13/06-80091-013 50.00

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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:  4/10/06 908 436 959