


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

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

<b>DOCUMENT # L04000041198</b> 1. Entity Name ELMANN REALTY OF FLORIDA, LLC	
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<b>Principal Place of Business</b> 1304 NORTH BROAD STREET HILLSIDE, NJ 07205 US	<b>Mailing Address</b> 1304 NORTH BROAD STREET HILLSIDE, NJ 07205 US
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03292006 No Chg-LLC	CR2E083 (11/05)
4. FEI Number 47-0972067	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

**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 reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

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

9. MANAGING MEMBERS/MANAGERS	
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	MGRM VICTOR, HARA 1304 N BROAD ST HILLSIDE, NJ 07205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM VITTORIO, DANA 13047 N BRAOD ST HILLSIDE, NJ 07205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

000000493107  
04/19/06-80091-014 50.00

**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: \_\_\_\_\_ *[Handwritten Signature]* 04/08/06 90843695