

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000051755

FILED
Jan 09, 2006
Secretary of State

Entity Name: STEIN & SCHWARTZ PROPERTIES, LLC

Current Principal Place of Business:

1500 NORTH DIXIE HIGHWAY, STE. 304
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

1500 NORTH DIXIE HIGHWAY, STE. 304
WEST PALM BEACH, FL 33401

New Mailing Address:

FEI Number: 59-2528937

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHWARTZ, RICHARD G
1500 NORTH DIXIE HWY, SUITE 304
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: STEIN, JEFFREY V
Address: 1500 NORTH DIXIE HIGHWAY, STE. 304
City-St-Zip: WEST PALM BEACH, FL 33401

Title: MGRM () Delete
Name: SCHWARTZ, RICHARD G
Address: 1500 NORTH DIXIE HIGHWAY, STE. 304
City-St-Zip: WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: STEIN, JEFFREY V
Address: 27 RABBITS RUN
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: MGRM (X) Change () Addition
Name: SCHWARTZ, RICHARD G
Address: 1500 NORTH DIXIE HIGHWAY, STE. 304
City-St-Zip: WEST PALM BEACH, FL 33401 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: JEFFREY V STEIN

MGRM

01/09/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date