

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000073099

Entity Name: PARTIAL ECLIPSE LLC

FILED
Feb 22, 2006
Secretary of State

Current Principal Place of Business:

1712 N.E. 28TH DRIVE
WILTON MANORS, FL 33334

New Principal Place of Business:

400 ALTON ROAD
3403
MIAMI BEACH, FL 33139

Current Mailing Address:

1712 N.E. 28TH DRIVE
WILTON MANORS, FL 33334

New Mailing Address:

400 ALTON ROAD
3403
MIAMI BEACH, FL 33139

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAW CENTER OF THE AMERICAS, LLC
701 BRICKELL AVENUE STE 1650
MIAMI, FL 33131 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: STEPHANY, PAMELA
Address: 1712 N.E. 28TH DRIVE
City-St-Zip: WILTON MANORS, FL 33334

Title: MGRM () Delete
Name: BLANK, MICHAEL
Address: 400 ALTON RD #1906
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: BLANK, MICHAEL
Address: 400 ALTON RD #3403
City-St-Zip: MIAMI BEACH, FL 33139

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: MICHAEL BLANK

MGRM

02/22/2006

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