2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Feb 14, 2005 8:00 am Secretary of State

DOCUMENT # L0400082921 1. Entity Name MILLENNIUM BAY HARBOR, L.L.C.							02-14-2005 90178 038 ****50.00				
Principal Place of Business 2800 WESTON ROAD SUITE #103 WESTON, FL 33331			Mailing Address 2800 WESTON ROAD SUITE #103 WESTON, FL 33331								
2. Principal Place of Business			3. Mailing Address								11] [1] 11 15]
Suite, Apt. #, etc.			Suite, Apt. #, etc.				02082005	Chg-LLC	CR2E083	(10/03)	
City & State			City & State				4. FEI Numb	er 20-1946	179	\rightarrow	plied For Applicable
Zip	Country	Country Zip		Cour	ntry	5. Certificate of Status Desire			\$5.00 Additional Fee Required		
	6. Name and Address	of Current Re	egistered Agent				7. Name and	d Address of New R	egistered Age	nt	· · · · · · · · · · · · · · · · · · ·
MILLENNIUM DEVELOPMENT ENTERPRISES, INC. 2800 WESTON ROAD SUITE #103 WESTON, FL 33331					MILLE	LENNIUM DEVELOPHENT ENTERPRISES, LAC reel Address (P.O. Box Number is Not Acceptable) 2800 WESTON BOAD SUITE # 103					
		City	(.)=	ESTON FL Zip Code 333				774			
8. The above named entity submits this statement for the flurpose 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 Signature, typed or printed name of registered agent and by fill applicable. (NOTE: Registered Agent signature required when reinstating) - DATE											
Filing Fee is \$50.00 Due by May 1, 2005 9. MANAGING MEMBERS/MANAGERS						 	Make check payable to Florida Department of State ADDITIONS/CHANGES				
9.		NG MEMBER		10.		144		ADDITIONS		2 01	
TITLE	MGR Delete MILLENNIUM DEVELOPMENT ENTERPRISES, INC.				ITLE MGR ACHAINAINM DEVELOPMENT ENTER					Change	Addition
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11. Thereby (certify that the information si	upplied with t	his filing does not qualify fo	r the ex	emption sta	nea in Se	ecaon 119.07(3	χη, Florida Statutės.	1 Juniner certify	mai ine ir	normation

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my guarantee 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:

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

02/08/05 (954) 385-8535

Daytime Phone #