2007 LIMITED LIABILITY COMPANY

Apr 17, 2007 8:00 am Secretary of State ANNUAL REPORT DOCUMENT # L04000086527 04-17-2007 90248 023 ****50.00 1. Entity Name PINELANDS - KENDALL HOTEL, LLC Principal Place of Business Mailing Address 5414 NORTHWEST 72ND AVENUE 5414 NORTHWEST 72ND AVENUE MIAMI, FL 33166 MIAMI, FL 33166 01122007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 27-0113332 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SETA FELLMAN CFRA, LL€ DO NOT WRITE 54H HOU TO AK CORPORATE CENTER THREE AT INT'L PLAZ 4221 W BOY SCOUT BLVD., 10TH FL IN THIS SPACE TAMPA, FL-33607-5736 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2007 MANAGING MEMBERS/MANAGERS 9. TITLE MGR NAME FELLMAN, SETH 5414 NW 72ND AVE STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33166 TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME" STREET ADDRESS DO NOT WRITE CITY+ST-7IP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE

11. I hereby certify that the information supplied with this filling 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 acculimited liability company or the receiver te 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 trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

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

STREET ADDRESS CITY-ST-ZIP