


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**May 01, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L05000000030</b>	
1. Entity Name 4016 BROADWAY, LLC	

Principal Place of Business 450 EAST LAS OLAS BOULEVARD STE 1500 FT. LAUDERDALE, FL 33301	Mailing Address 450 EAST LAS OLAS BOULEVARD STE 1500 FT. LAUDERDALE, FL 33301
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**DO NOT WRITE IN THIS SPACE**



01052006No Chg-LLC      CR2E083 (11/05)

4. FEI Number 20-2097136	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fees Required

6. Name and Address of Current Registered Agent

AMERICAN INFORMATION SERVICES, INC.  
ONE S.E. THIRD AVENUE 28TH FL  
MIAMI, FL 33131

**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 reappointing)      DATE \_\_\_\_\_


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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HWH SR PERP TRUST MASTER TR 1 SHARE A 450 E LAS OLAS BLVD STE 1500 FORT LAUDERDALE, FL 33301
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U00000549049  
05/13/06-80005-006 50.00

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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:  \_\_\_\_\_      Date: 4/25/06      Daytime Phone # \_\_\_\_\_

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