

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000008998

FILED  
Apr 13, 2007  
Secretary of State

Entity Name: IBP FLEXXSPACE 2 GP, LLC

**Current Principal Place of Business:**

1400 N.W. 107TH AVENUE  
MIAMI, FL 33172

**New Principal Place of Business:**

**Current Mailing Address:**

1400 N.W. 107TH AVENUE  
MIAMI, FL 33172

**New Mailing Address:**

FEI Number: 20-3420727

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: MGR ( ) Delete  
Name: ADLER NAP-G.P., INC.,  
Address: 1400 N.W. 107TH AVENUE  
City-St-Zip: MIAMI, FL 33172

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
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Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: ADLER NEWCO GP 2 INC.,  
Address: 1400 N.W. 107TH AVENUE  
City-St-Zip: MIAMI, FL 33172

Title: P ( ) Change (X) Addition  
Name: ADLER, MICHAEL M  
Address: 1400 NW 107TH AVENUE  
City-St-Zip: MIAMI, FL 33172

Title: EVT ( ) Change (X) Addition  
Name: LEVY, JOEL  
Address: 1400 NW 107TH AVENUE  
City-St-Zip: MIAMI, FL 33172

Title: EV ( ) Change (X) Addition  
Name: ADLER, MATTHEW L  
Address: 1400 NW 107TH AVENUE  
City-St-Zip: MIAMI, FL 33172

Title: EV ( ) Change (X) Addition  
Name: HARRIS, BRETT W  
Address: 1400 NW 107TH AVENUE  
City-St-Zip: MIAMI, FL 33172

Title: S ( ) Change (X) Addition  
Name: ADLER, LIND K  
Address: 1400 NW 107TH AVENUE  
City-St-Zip: MIAMI, FL 33172

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: LINDA K ADLER

S

04/13/2007

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