

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000073300

FILED  
Aug 16, 2006  
Secretary of State

**Entity Name:** HIGHTIDE PROPERTIES, LLC

**Current Principal Place of Business:**

965 N. NOB HILL ROAD, #127  
PLANTATION, FL 33324

**New Principal Place of Business:**

**Current Mailing Address:**

965 N. NOB HILL ROAD, #127  
PLANTATION, FL 33324

**New Mailing Address:**

**FEI Number:** 01-0842933      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

SAFRIN, MICHAEL  
965 N. NOB HILL ROAD, #127  
PLANTATION, FL 33324 US

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

SAFRIN, MICHAEL MGRM  
965 N. NOB HILL ROAD, #127  
PLANTATION, FL 33324 US

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: MICHAEL SAFRIN

08/16/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SAFRIN, MICHAEL  
Address: 10677 N.W. 1ST STREET  
City-St-Zip: PLANTATION, FL 33324

Title: MGRM ( ) Delete  
Name: SAFRIN, ANA  
Address: 10677 N.W. 1ST STREET  
City-St-Zip: PLANTATION, FL 33324

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: SAFRIN, MICHAEL MGRM  
Address: 10677 N.W. 1ST STREET  
City-St-Zip: PLANTATION, FL 33324

Title: MGRM (X) Change ( ) Addition  
Name: SAFRIN, ANA MGR  
Address: 10677 N.W. 1ST STREET  
City-St-Zip: PLANTATION, FL 33324

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 SAFRIN

MGRM

08/16/2006

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