2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 24, 2005 8:00 am
Secretary of State
01-24-2005 90100 005 ****50.00

DOCUMENT # L95000000563

1. Entity Name
NORTH MIAMI BEACH COMMERCE CENTER L.C.

Principal Place of Business	Mailing Address
15499 WEST DIXIE HIGHWAY NORTH MIAMI BEACH, FL 33162	15499 WEST DIXIE HIGHWAY NORTH MIAMI BEACH, FL 33162

Z00003334

01112005 Chg-LLC CR2E083 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0601022 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
KURZMAN, JOHN 15499 WEST DIXIE HIGHWAY NORTH MIAMI BEACH, FL 33162	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____ DATE
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, 2005

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR HOCKHAUSER, PAUL 1 BAY BLVD LAWRENCE, NY 11559	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR KURZMAN, JOHN ~~16496 NE 31 AVE~~ ~~NORTH MIAMI BEACH, FL 33160~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☒ Change ☐ Addition 3370 NE 190 ST., Apt 3711 Aventura, FL 33180
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR KURZMAN, RHODA ~~16496 NE 31 AVE~~ ~~NORTH MIAMI BEACH, FL 33160~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☒ Change ☐ Addition 3370 NE 190 ST., APT. 3711 AVENTURA, FL 33180
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR LENARD, JADWIGA 15499 WEST DIXIE HWY NORTH MIAMI BEACH, FL 33162	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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 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: Rhoda Kurzman RHODA KURZMAN 305-945-4100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #