

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000001404

FILED  
Apr 28, 2008  
Secretary of State

Entity Name: YBOR OPERATIONS, L.C.

**Current Principal Place of Business:**

3819 E 7TH ST.  
TAMPA, FL 33605 US

**New Principal Place of Business:**

**Current Mailing Address:**

ONE OAKWOOD BLVD.  
SUITE 200  
HOLLYWOOD, FL 33020

**New Mailing Address:**

FEI Number: 59-3529715      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HUGH, MCNEW  
707 NE 195TH. STREET  
NORTH MIAMI BEACH, FL 33179 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: MGRM ( ) Delete  
Name: DANTZER, JOSEPH  
Address: ONE OAKWOOD BLVD. SUITE 200  
City-St-Zip: HOLLYWOOD, FL 33020 US

Title: MGRM ( ) Delete  
Name: BEASLEY, WILLIAM M  
Address: ONE OAKWOOD BLVD. SUITE 200  
City-St-Zip: HOLLYWOOD, FL 33020 US

Title: MGRM ( ) Delete  
Name: BLANKE, JOHN W  
Address: ONE OAKWOOD BLVD. SUITE 200  
City-St-Zip: HOLLYWOOD, FL 33020 US

Title: MGRM ( ) Delete  
Name: GARFINKEL, SHIRLEY  
Address: ONE OAKWOOD BLVD. SUITE 200  
City-St-Zip: HOLLYWOOD, FL 33020 US

Title: MGRM ( ) Delete  
Name: KRAEMER, HELMUT J  
Address: ONE OAKWOOD BLVD. SUITE 200  
City-St-Zip: HOLLYWOOD, FL 33020 US

Title: MGRM ( ) Delete  
Name: LASSNER, STEWART  
Address: ONE OAKWOOD BLVD. SUITE 200  
City-St-Zip: HOLLYWOOD, FL 33020 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: WILLIAM BEASLEY

MGRM

04/28/2008

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