2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

STREET ADDRESS CITY-ST-ZIP

11. I hereby cartily that the ini indicated on this report is limited liability company of

Mar 06, 2006 08:00 AM Secretary of State DOCUMENT # L99000001351 **GOLDEN SHOPPES, LLC** Principal Place of Business Mailing Address 943 CLINT MOORE ROAD 943 CLINT MOORE ROAD BOCA RATON, FL 33487 BOCA RATON, FL 33487 03022006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0902321 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE HEISE, MARTIN P 943 CLINT MOORE RD BOCA RATON, FL 33487 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Hituuuti455129 Filing Fee is \$50.00 Due by May 1, 2008 83715706~80813~823~58.1m MANAGING MEMBERS/MANAGERS 9. MGRM MLE NAME BERSON, GERALD S STREET ADDRESS 943 CLINT MOORE ROAD BOCA RATON, FL 33487 CITY-ST-ZIP MGRM TITLE HEISE, MARTIN P NAME STREET ADDRESS 943 CLINT MOORE ROAD CITY-ST-ZIP BOCA RATON, FL. 33487 TITS E MAME STREET ADDRESS DO NOT WRITE CHY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP NALK STREET ADDRESS CITY-ST-ZIP NAME

FILED

SIGNATURE: g managing member, or authorized representative SIGNATURE AND TYPED OR PRINTED NAME O

mation supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information to 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 effect of the properties of the properties of the second that it is reported by Chapter 608, Florida Statutes.