,2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

 I hereby cernly that the in indicated on this report is limited liability company

SIGNATURE:

Mar 06, 2006 08:00 AM Secretary of State DOCUMENT # L99000001353 1. Entity Name BOYNTON SHOPPES, LLC Mailing Address Principal Place of Business 943 CLINT MOORE ROAD 943 CLINT MOORE ROAD BOCA RATON, FL 33487 BOCA RATON, FL 33487 man S 03022006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0902318 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HEISE, MARTIN P DO NOT WRITE 943 CLINT MOORE ROAD BOCA RATON, FL 33487 IN THIS SPACE 5. 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 orinted name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) 1111111111455949 Filing Fee is \$50.00 Due by May 1, 2006 03/16/06-80010-005 50.00 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE NAME BERSON, GERALD S 943 CLINT MOORE ROAD STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33487 TITLE HEISE, MARTIN P NAME STREET ADDRESS 943 CLINT MOORE ROAD BOCA RATON, FL 33487 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP 717# F IN THIS SPACE NAME STREET ADDRESS C)17-S1-Z)2 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

prmation supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information 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 the septive for truetee improvements of execute this report as required by Chapter 608, Florida Statutes.

FILED