

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000033605

Entity Name: 3305 HOLDING COMPANY, LLC

FILED
Jul 07, 2005
Secretary of State

Current Principal Place of Business:

1401 PONCE DE LEON BLVD., STE. 200
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

1401 PONCE DE LEON BLVD., STE. 200
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 80-0075389 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:

LAW OFFICES OF CARRILLO & CARRILLO, P.A.
1401 PONCE DE LEON BLVD., STE. 200
CORAL GABLES, FL 33134 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: REALASSIST, INC.,
Address: 13301 SW 124TH ST
City-St-Zip: MIAMI, FL 33186

Title: MGRM () Delete
Name: INFINITY DEVELOPERS,, INC.
Address: 8999G SW 133 CT
City-St-Zip: MIAMI, FL 33186

Title: MGRM () Delete
Name: MARK E. REARDON, INC.,
Address: 15790 SW 88TH AVE
City-St-Zip: MIAMI, FL 33157

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: REALASSIST, INC.,
Address: 12915 SW 132 AVENUE
City-St-Zip: MIAMI, FL 33186

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 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 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: JOHN MICALI

MAN

07/07/2005

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