## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000043371

City-St-Zip:

Entity Name: LAUREL PROPERTIES, LLC

FILED Apr 25, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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5600 COLLINS AVENUE, #15N 16400 COLLINS AVENUE, # 2442

MIAMI BEACH, FL 33140 SUNNY ISLES, FL 33160

Current Mailing Address: New Mailing Address:

5600 COLLINS AVENUE, #15N 16400 COLLINS AVENUE, # 2442

MIAMI BEACH, FL 33140 SUNNY ISLES, FL 33160

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

AIZENSTAT, NATAN AIZENSTAT, NATAN

5600 COLLINS AVENUE #15N 16400 COLLINS AVENUE, # 2442 MIAMI BEACH, FL 33140 US SUNNY ISLES, FL 33160 US

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: NATAN AIZENSTAT 04/25/2006

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: ( ) Delete Title: MR ( ) Change (X) Addition

 Name:
 Name:
 AIZENSTAT, NATAN MR

 Address:
 Address:
 16400 COLLINS AVENUE, # 2442

 City-St-Zip:
 City-St-Zip:
 SUNNY ISLESSUNNY ISLES, FL 33160

Title: ( ) Delete Title: MS ( ) Change (X) Addition
Name: DUNAYEVICH, SILVIA L MS
Address: Address: 16400 COLLINS AVENUE # 2442

 Address:
 Address:
 16400 COLLINS AVENUE, # 2442

 City-St-Zip:
 City-St-Zip:
 SUNNY ISLES, FL 33160

Title: ( ) Delete Title: MR ( ) Change (X) Addition Name: Name: AlZENSTAT, NICOLAS A MR Address: 8925 COLLINS AVE. APT. 11 E

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SURFSIDE, FL 33154

SIGNATURE: NATAN AIZENSTAT MR 04/25/2006