

**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 10, 2006 8:00 am**  
**Secretary of State**

04-10-2006 90036 035 \*\*\*\*50.00

**DOCUMENT # L97000000151**



1. Entity Name  
**ENGELBERG & MILGRIM, P.L.**

Principal Place of Business 3230 STIRLING ROAD SUITE #1 HOLLYWOOD, FL 33021	Mailing Address 3230 STIRLING ROAD SUITE #1 HOLLYWOOD, FL 33021
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2. Principal Place of Business 4040 Sheridan Street Suite, Apt. #, etc.	3. Mailing Address 4040 Sheridan Street Suite, Apt. #, etc.
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03272006 Chg-LLC CR2E083 (11/05)

City & State Hollywood, Florida	City & State Hollywood, Florida	4. FEI Number 65-0731477	Applied For Not Applicable
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Zip 33021	Country USA	Zip 33021	Country USA	5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00</b> Additional Fee Required
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6. Name and Address of Current Registered Agent MILGRIM, LAURIE E MORRIS ENGELBERG & LAURIE E. MILGRIM 3230 STIRLING ROAD SUITE #1 HOLLYWOOD, FL 33021	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 4040 Sheridan Street City Hollywood FL Zip Code 33021
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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 Laurie E. Milgrim, Esq. *Laurie E. Milgrim* 03/27/2006  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$50.00  
 Due by May 1, 2006**

**Make check payable to  
 Florida Department of State**

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MORRIS ENGELBERG & LAURIE E. MILGRIM, P.A. 3230 STIRLING ROAD HOLLYWOOD, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4040 Sheridan Street Hollywood, Florida 33021
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MORRIS, ENGELBERG 3230 STIRLING ROAD, SUITE #1 HOLLYWOOD, FL 33021 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4040 Sheridan Street Hollywood, Florida 33021
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is 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 limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Morris Engelberg & Laurie E. Milgrim, P.A., MGRM

SIGNATURE: By: Laurie E. Milgrim Laurie E. Milgrim 03/27/2006 954-966-3900  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #