

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000006211

FILED
Sep 01, 2006
Secretary of State

Entity Name: BAKLOT ASSOCIATES, LLC

Current Principal Place of Business:

608 WEST DILIDO DRIVE
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

608 WEST DILIDO DRIVE
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 65-1012368 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:

RAVELO, JOHANNA
1111 BRICKELL AVENUE
SUITE 1100
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

MERMELSTEIN HIDALGO LLP
3211 PONCE DE LEON BLVD
SUITE 305
CORAL GABLES, FL 33134 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: MICHAEL MERMELSTEIN

09/01/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: JAIN, AVRA
Address: 608 WQUEST DILIDO DRIVE
City-St-Zip: MIAMI BEACH, FL 33139

Title: MBR () Delete
Name: MORTENSEN, SUSANNE
Address: 608 WEST DILIDO DRIVE
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES:

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 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.

SIGNATURE: AVRA JAIN

MGRM

09/01/2006

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