## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:

## Mar 19, 2007 08:00 AN Secretary of State **DOCUMENT # L05000098221** 1. Entity Name 504 É. BAY HARBOR, LLC Principal Place of Business Mailing Address 9511 COLLINS AVENUE, #1502 9511 COLLINS AVENUE, #1502 SURFSIDE, FL 33154 SURFSIDE, FL 33154 CR2E083 (11/05) 03082007 No Chg-LLC DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-3887317 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SINGER, BERNARD A ESQ. DO NOT WRITE 3107 STIRLING ROAD, SUITE 105 FT. LAUDERDALE, FL 33312 IN THIS SPACE 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 Signature, typed or printed name of registered agent and tide if applicable (NOTE Registered Agent signature required when reinstaling) Filing Fee is \$50.00 Due by May 1, 2007 9. MANAGING MEMBERS/MANAGERS TITLE MGR ASSAYAG, VITORIA NAME STREET ADDRESS 9511 COLLINS AVENUE, #1502 CITY-ST-ZIP SURFSIDE, FL 33154 me 000000670123 03/27/07-80100-010 **50.**00 NAME STREET ADDRESS CITY-ST-7IP TILLE NAME STREET ADDRESS DO NOT WRITE CATY-ST-ZIP TITLE IN THIS SPACE NAME STREET ACCRESS CITY-ST-ZIP TIFLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 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 tipe receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

JTWORIZED REPRESENTATIVE

FILED