2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2005
Secretary of State

DOCUMENT# F97000005676

Entity Name: LL PARTNERS, INC. OF NEVADA

Current Principal Place of Business:

700 N.W. 107TH AVENUE
MIAMI, FL 33172 US

New Principal Place of Business:

Current Mailing Address:

700 N.W. 107TH AVENUE
MIAMI, FL 33172 US

New Mailing Address:

FEI Number: 91-1869823 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: GROSS, BRUCE
Address: 700 N.W. 107 AVENUE
City-St-Zip: MIAMI, FL 33172 US

Title: DV ( ) Delete
Name: SHEVORY, MARK A
Address: 8190 STATE ROAD 84
City-St-Zip: DAVIE, FL 33322 US

Title: DV ( ) Delete
Name: KRASNOFF, JEFFREY P
Address: 1601 WASHINGTON AVENUE, 8TH FLOOR
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: DV ( ) Delete
Name: RUBIN, SHELLY
Address: 1601 WASHINGTON AVENUE, 8TH FLOOR
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: VT ( ) Delete
Name: MALCOLM, WAINWRIGHT
Address: 700 NW 107TH AVE
City-St-Zip: MIAMI, FL 33172 US

Title: V ( ) Delete
Name: MCCAIN, DAVID B
Address: 700 N.W 107 AVENUE
City-St-Zip: MIAMI, FL 33172 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: KRASNOFF, JEFFREY P
Address: 1601 WASHINGTON AVENUE, 8TH FLOOR
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: D (X) Change ( ) Addition
Name: RUBIN, SHELLY
Address: 1601 WASHINGTON AVENUE, 8TH FLOOR
City-St-Zip: MIAMI BEACH, FL 33139 US

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WAYNEWRIGHT MALCOLM V 04/12/2005

Electronic Signature of Signing Officer or Director Date