2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Apr 11, 2005 08:00 AM Secretary of State DOCUMENT # L0000001743 1. Entity Name 27TH AVENUE STATION, LLC Principal Place of Business Mailing Address P.O. BOX 23910 P.O. BOX 23910 FT. LAUDERDALE, FL 33307 FT. LAUDERDALE, FL 33307 04082005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0999495 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MORGAN, PHILIP J ESQ DO NOT WRITE 200 EAST LAS OLAS BOULEVARD, SUITE #1800 FORT LAUDERDALE, FL 33301 IN THIS SPACE 3. 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 title if applicable (NOTE, Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS ٥. MGRM TITLE NAME DEEM, CURTIS STREET ADDRESS P.O. BOX 23910 U00000299778 04/11/05-80123-021 50.00 CITY-ST-ZIP FT. LAUDERDALE, FL 33307 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP 11. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 it 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.

FILED

Davime Phone #