2008 LIMITED LIABILITY COMPANY

FILED **ANNUAL REPORT** Mar 24, 2008 08:00 Al DOCUMENT # L00000002297 **Secretary of State** 1. Entity Name ANA GATEWAY L.C. Principal Place of Business Mailing Address 2875 N.E. 191 STREET, PENTHOUSE 1 2875 N.E. 191 STREET, PENTHOUSE 1 AVENTURA: FL 33180 AVENTURA, FL 33180 01042008No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number **NOT APPLICABLE** Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KLEIN, THEODORE JESO. DO NOT WRITE **8030 PETERS ROAD BUILDING D SUITE 104** IN THIS SPACE PLANTATION, FL 33324 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, typed or printed name of registered agent and title & applicable. (NOTE: Registered Agent aignature required when rematating) FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 9. MANAGING MEMBERS/MANAGERS MGR TITLE SREDNI, ISAAC NAME 2875 N.E. 191 STREET, PENTHOUSE 1 STREET ADDRESS CITY-ST-ZIP AVENTURA, FL 33180 TITLE 000000868378 04/09/08-80006-008 138.75 MALE STREET ADDRESS CFTY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS DITY-ST-ZIP NAME

11. I hereby certify that the information supplied with this filling 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 eath; that I am a managing member or manager of the limited liability company or the receiver of injuries empowered to execute this papert as required by Chapter 608, Florida Statutes.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE NAME SIRU LADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED HAME OF

Daytime Phone #