2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

Secretary of State 02-16-2006 90145 042 ****50.00 **DOCUMENT # L00000005561** SCHUSTER LIMITED COMPANY Principal Place of Business Mailing Address 30002183 358 ESPLENADE 358 ESPLENADE **SUITE 56** SUITE 56 BOCA RATON, FL 33432 BOCA RATON, FL 33432 01172006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1020007 Not Applicable \$5.00 Additional. Fee Required 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent MIAMI CORPORATE SYSTEMS, INC. DO NOT WRITE 5200 BLUE LAGOON DRIVE SUITE 700 IN THIS SPACE MIAMI, FL 33126 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. DATE Signature, typed or printed name of registered spart and tile if applicable (NOTE: Registered Agent signature required when minetating) Filing Fee is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS 9. TITLE MGRM SCHUSTER, BELARMINA NALE STREET ADDRESS 2633 NW 45TH STREET CITY-ST-ZIP BOCA RATON, FL 33434 TITLE STREET ADDRESS CITY-57-ZIP TITLE -NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NULE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS

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 oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to greatly that it is report as required by Chapter 608. Florida Statutes.

SIGNATURE

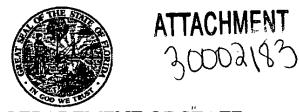
CITY-ST-ZIP

NAME STREET ADDRESS

> BIGHATURE AND TYPED OR PRINTED NAME OF BIGHING MAIN IGING MEMBER, OR AUTHORIZED REPRESENTATIVE

FILED Mar 10, 2006 8:00 am

561-417570



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 20, 2006

SCHUSTER LIMITED COMPANY 358 ESPLENADE SUITE 56 BOCA RATON, FL 33432

Subject: SCHUSTER LIMITED-COMPANY

Reference Number:

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report has not been filed and a

copy is being returned for the following correction(s):

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The annual report/uniform business report must be signed by a managing member, manager or an authorized representative of the limited liability company.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/JE ANNUAL REPORTS SECTION