


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

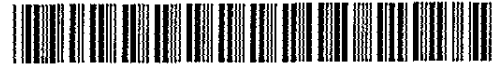
**FILED**

**Apr 17, 2006 08:00 AM  
Secretary of State**

<b>DOCUMENT # L00000006345</b> 1. Entity Name BETA EPSILON/CADILLAC, L.L.C.	
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Principal Place of Business 4000 NORTH FEDERAL HIGHWAY, SUITE 206 BOCA RATON, FL 33431	Mailing Address 1000 OMNI BLVD. NEWPORT NEWS, VA 23606
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03272006No Chg-LLC

CR2E083 (11/05)

4. FEI Number 65-1020016	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent  MACLAREN, LINDA O 798 S. FEDERAL HWY, STE 100 BOCA RATON, FL 33432
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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.

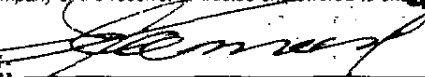
SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00  
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BETA EPSILON/CADILLAC, INC. 4000 N FEDERAL HWY STE 206 BOCA RATON, FL 33431
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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 the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:**  **NICK ECONOMOS** 04/04/2006 (757) 591-3519  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #