## 2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

## **DOCUMENT # L00000007687**

1. Entity Name GOLDEN NUGGET UNITS, L.C.



**FILED** Apr 11, 2006 08:00 AM Secretary of State

Principal Place of Business **18101 COLLINS AVENUE** 

SUMNY ISLES BEACH, FL 33160

CORAL GABLES, FL 33134

SIGNATURE:

Mailing Address

**18101 COLLINS AVENUE** 

SUNNY ISLES BEACH, FL 33180



04042006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number Applied For 65-1024646 Not Applicable \$5.00 Additional

5. Certificate of Status Desired

Fee Required

## DO NOT WRITE IN THIS SPACE

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

6. Name and Address of Current Registered Agent

FIELDSTONE, RONALD R 201 ALHAMBRA CIRCLE, SUITE 601

## DO NOT WRITE IN THIS SPACE

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 Sponture, typed or printed name of registered agent and fille if applicable. (NOTE: Registered Agent signature required when reinstating)		CATE	
Filing Fee is \$50.00 Due by May 1, 2006			110000582749 04/26/06-80003-024 50.00
9. TITLE NAME	MANAGING MEMBERS/MANAGERS MGRM DEZER, MICHAEL		
STREET ADDRESS CITY-ST-ZIP	89 FIFTH AVENUE, 11TH FLOOR NEW YORK, NY 10003		
DTLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DEZERTZOV, NEOMI 89 FIFTH AVENUE, 11TH FLOOR NEW YORK, NY 10003		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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 accupate 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.			