


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 18, 2007 8:00 am
Secretary of State

04-18-2007 90029 048 ****50.00

DOCUMENT # L00000009795 1. Entity Name DREXELER, L.L.C.	
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Principal Place of Business % ELLEN ROSE ONE SE THIRD AVE., SUITE 2400 MIAMI BEACH, FL 33131	Mailing Address % ELLEN ROSE ONE SE THIRD AVE., SUITE 2400 MIAMI BEACH, FL 33131 301 ARTHUR GODFREY RD
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60037953



04092007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 65-1033231	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent THERREL BAISDEN, P.A. SUNTRUST INTERNATIONAL CENTER ONE SE 3RD AVE., SUITE 2400 MIAMI, FL 33131
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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 re-registering) DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GLUECKMANN, FERDINAND % ONE SE THIRD AVE., SUITE 2400 MIAMI BEACH, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DUNAEVSKY, DOV % ONE SE THIRD AVE., SUITE 2400 MIAMI BEACH, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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:

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

4/6/07

Date

305.5329551

Daytime Phone #