2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L00000012840

Entity Name

SB TAMARAC COMMERCE CENTER, LLC



Principal Place of Business

Mailing Address

2005 WEST CYPRESS CREEK RD., STE. 202 FT. LAUDERDALE, FL 33309

2005 WEST CYPRESS CREEK RD., STE. 202 FT. LAUDERDALE, FL. 33309 FILED 2005 MAY 25 PM 3: 48

SECRETARY OF STATE TALLAHASSEE, FLORIDA



DATE

04082005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 65-1056801 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable.

BUTTERS, SAMUEL 2005 WEST CYPRESS CREEK RD., STE. 202 FT. LAUDERDALE, FL. 33309

DO NOT WRITE IN THIS SPACE

	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, the obligations of registered agent.	I am familiar with, and accept
CI	CNATHE	

(NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2005

9.	MANAGING MEMBERS/MANAGERS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BUTTERS, SAMUEL 2005 W. CYPRESS CREEK RD. SUITE 202 FT. LAUDERDALE, FL 33309					
NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS ČITY-ST-ZIP						
TITLE KAME STREET ADDRESS CITY-ST-ZIP						

100055341351 05/25/05--01012--025 **400.00

DO NOT WRITE IN THIS SPACE

#80

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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.

CI	1	N	Λ٦	T1		E:	
-	u	14	~		J	ı L	

Moulters

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

1/27/05

Daytime Phone