2006 LIMITED LIABILITY COMPANY

Feb 24, 2006 08:00 AM **ANNUAL REPORT Secretary of State** DOCUMENT # L01000003268 1. Entity Name HILCO, L.L.C. Principal Place of Business Mailing Address U000000445418 4720 PIERCE STREET **4720 PIERCE STREET** 03/07/06-80044-008 50.00 HOLLYWOOD, FL 33021 HOLLYWOOD, FL 33021 02212006 No Chg-LLC CR2E083 (11/05) Applied For 4. FEI Number 65-0353698 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SINCLAIR, STANLEY **4720 PIERCE STREET** HOLLYWOOD, FL 33021 The above named entity submits this statement for the purpose of changing its registered effice or registered at the obligations of registered agent. or beth in the State of Florida. I am familiar with, and accept Feb 21 06 SIGNATURE Signature, typed or purited name of registered again and fille if applicable. (NOTE: Registered Agent signature required when reinstalling) Filing Fee is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS 9, MGR TITLE SINCLAIR, STANLEY NAME STREET ADDRESS **4720 PIERCE STREET** HOLLYWOOD, FL 33021 CITY-ST-ZIP SINCLAIR, HELENE NAME STREET ADDRESS 4720 PIERCE STREET CAY-ST-ZIP HOLLYWOOD, FL 33021 SITLE NAME STREET ADDRESS CITY-ST-ZIP 7171.8 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 7171.8 NAME STREET ADDRESS

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 fiability company or the receiper or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE AND TYPED OR PRINTED HAVE OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE

SIGNATURE

FILED

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