2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

Mar 21, 2005 08:00 AM Secretary of State **DOCUMENT # L01000007626** 1. Entity Name KREINDEL REAL ESTATE LLC Principal Place of Business Mailing Address 2615 BUCKHURST 6768 10TH AVE. N LAKE WORTH, FL 33467 BEACHWOOD, OH 44122 CR2E083 (10/03) 01132005No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1107405 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KRIENDEL, MARK DO NOT WRITE 1655 PALM BEACH LAKES BLVD. WEST PALM BEACH, FL 33401 IN THIS SPACE 3. 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, 2005 U00000271956 03/21/05-80067-009 50.00 MANAGING MEMBERS/MANAGERS 9. TITLE MGRM KREINDEL, MARK NAME 2615 BUCKHURST STREET ADDRESS CITY - ST-ZIP BEACHWOOD, OH 44122 TIFLE MAME STREET ADDRESS CITY-ST-ZIP TIDE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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

SIGNATURE: * SIGNATURE AND TYPED OR PRINTED HAME OF GIVEN HAME OF MEMBER, OR AUTHORIZED REPRESENTATIVE

STREET ADDRESS CITY-ST-ZIP

x 3/17/2005 x 216-464-3760

FILED