

2005 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

**FILED
Aug 18, 2005
Secretary of State**

DOCUMENT# L01000013421

Entity Name: NMB PLAZA, L.L.C.

Current Principal Place of Business:

2020 NE 163RD STREET
109
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

2221 NE 164TH STREET
266
NORTH MIAMI BEACH, FL 33160

Current Mailing Address:

2020 NE 163RD STREET
109
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

2221 NE 164TH STREET
266
NORTH MIAMI BEACH, FL 33160

FEI Number: 65-1129356 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FELDMAN, BENNETT G
2655 LEJEUNE ROAD SUITE 508
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HADAD, ELI
Address: 2020 NE 163RD STREET
City-St-Zip: N MIAMI BEACH, FL 33162

Title: MGRM () Delete
Name: ROSEN, IKE
Address: P.O. BOX 2124 COLON FREE ZONE
City-St-Zip: PANAMA, XX XX XX

Title: MGRM (X) Delete
Name: VIDAL, MOSHE
Address: P.O. BOX 2124 COLON FREE ZONE
City-St-Zip: PANAMA, XX XX XX

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ROSEN, IKE
Address: PO BOX 2124 COLON FREE ZONE
City-St-Zip: PANAMA, XX XX XX

Title: MGRM (X) Change () Addition
Name: ESHKENAZI, JOSEPH
Address: P.O. BOX 2124 COLON FREE ZONE
City-St-Zip: PANAMA, XX XX XX

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: IKE ROSEN

MGRM

08/18/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date