2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

Mar 10, 2006 08:00 AM DOCUMENT # L01000016319 **Secretary of State** 1. Entity Name GOLDEN CHERRY RACING GROUP, LEC Principal Place of Business Mairing Address C/O ERIC CHERRY C/O ERIC CHERRY 1801 SOUTH FEDERAL HIGHWAY, STE. 300 1801 SOUTH FEDERAL HIGHWAY, STE. 300 **DELRAY BEACH FL 33483** DELRAY BEACH FL 33483 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt #, etc. 1st MOORE CR2E083 (10/05) City & State City & Stale Applied For 4. FEI Number 65-1141320 Not Applicable Zio \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CHERRY, ERIC Street Address (P.O. Box Number is Not Acceptable) 1801 SOUTH FEDERAL HWY., STE. 300 DELRAY BEACH FL 33483 Zip Code City 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 tire obligations of registered agent. Signature, typed or printed name or registered agent and lifts it applicable. (NOTE: Registered Agent signature required when seinst-time) DATE FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2006 ADDITIONS/CHANGES 9. MANAGING MEMBERS/MANAGERS 10. THE MGR ☐ Change Addition NAME CHERRY, ERIC NAME 1000000461745 STREET ADDRESS 1801 S FEDERAL HWY # 300 STREET ADDRESS 03/21/06-80008-006 50.00 CITY - ST - ZIP DELRAY BEACH FL 33483 CITY-ST-ZIP MGR Defete TIFLE ☐ Change ☐ Addition NAME GOLDBERG, STEVEN NAME STREET ADDRESS 28 OTSEGO RD STREET ADDRESS CITY-SI-IP VERONA NJ 07044 CHY-SI-ZIP TITLE --- - Belete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-70P CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STRIET ADDRESS DITY-SY-ZIP CITY-SE-ZIP BRE ☐ Detete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP ☐ Delete TIFLE Add/tion ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-S1-ZIP 11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 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 kability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes

CHERRY

SIGNATURE:

FILED

(561) 272-5667