2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L02000001718

1. Entity Name SUSÁN L. BERNSTEIN, LLC



Principal Place of Business

100 REGENT PARK PALM BEACH, FL 33480 Mailing Address

100 REGENT PARK PALM BEACH, FL 33480

FILED Mar 13, 2006 08:00 AM Secretary of State



01102006 Na Chg-LLC

CR2E063 (11/05)

4. FEI Number 41-2024357

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATE CREATIONS NETWORK INC. 941 FOURTH STREET #200 MIAMI BEACH, FL 33139

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	named entity submits this statement for the purpose of challions of registered agent.	nging its registered office or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, types or pitited name of registered agent and life if applicable.	(NOTE, Registered Agent signature required when remstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2008			
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS MGRM BERNSTEIN, SUSAN 100 REGENT PARK PALM BEACH, FL 33480		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			000000466472 03/23/06-80011-011 50.00
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11. I hereby certify that the information supplied with this filling 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 it 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.

MAME STREET ADDRESS

TITLE NAME STREET ADDRESS CITY-ST-20P TITLE NAME STREET ADDRESS CITY-ST-ZIP **TITLE** NAME STREET ADDRESS CHTY-ST-ZIP

GITY-ST-ZIP

SIGNATURE: SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3-7-06

561-833-9336

Daytime Phone of