

**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Jun 27, 2007  
Secretary of State**

DOCUMENT# L02000005396

Entity Name: 164 INVESTMENT LLC

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**Current Mailing Address:**

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

**New Mailing Address:**

FEI Number: 01-0624645      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

FELDMAN, BENNETT G  
2655 LEJEUNE ROAD  
5TH FLOOR  
CORAL GABLES, FL 33134 US

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:**

**ADDITIONS/CHANGES:**

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

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

Title: MGRM ( ) Delete  
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 exemption stated in Chapter 119, 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

06/27/2007

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