## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L02000019258

a. Entity Name
1164 ASSOCIATES, LLC

FILED
Mar 02, 2006 08:00 Al
Secretary of State

Principal Place of Business

1164 EAST OAKLAND PARK BLVD

SUITE 100

CITY-ST-ZIP

OAKLAND PARK, FL 33334

Mailing Address

1164 EAST OAKLAND PARK BLVD SUITE 100 OAKLAND PARK, FL 33334



02092006No Chg-LLC

CR2E083 (11/05)

4. FEI Number 81-0563553 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

## DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

DEBENEDICTIS, ROBERT N 1164 EAST OAKLAND PARK BLVD SUITE 100 OAKLAND PARK, FL 33334

## DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the purpose of chains of registered agent.	nging its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE		
	Signature, typed or printed name of registered agent and late if applicable	(NOTE, Registered Agent signature required when reinstating) DATE
Fi D	iling Fee is \$50.00 ue by May 1, 2006	
9.	MANAGING MEMBERS/MANAGERS	
TITLE	MGRM	
NAME	DEBENEDICTIS, ROBERT N	
STREET ADDRESS	39 GRAMERCY PARK	•
CITY-ST-ZIP	NEW YORK, NY 10010	
TITLE		'000000153424 03/14/06-80020-011 50.00
NAME		93714706-80920-011 50.00
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City-St-Zip		
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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 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.

SIGNATURES
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2-4-06

Date

Daytime Phone #