


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2006 08:00 AM
Secretary of State

DOCUMENT # L02000020860
 1. Entity Name
 151 EAST OKEECHOBEE ROAD, LLC



Principal Place of Business Mailing Address
 2121 PONCE DE LEON BOULEVARD, SUITE 1035 2121 PONCE DE LEON BOULEVARD, SUITE 1035
 CORAL GABLES, FL 33134 CORAL GABLES, FL 33134

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03072006No Chg-LLC CR2E083 (11/05)

4. FEI Number 36-4513919	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
 RODRIGUEZ, ROBERT W ESQ.
 2121 PONCE DE LEON BOULEVARD, SUITE 1035
 CORAL GABLES, FL 33134

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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 the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reissuing) DATE _____

Filing Fee is \$50.00
Due by May 1, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RODRIGUEZ, ROBERT W 2121 PONCE DE LEON BLVD, 1035 CORAL GABLES, FL 33134
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11. I hereby certify that the information supplied with this filing 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.

SIGNATURE: *Robert W. Rodriguez*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #