2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DOCUMENT # L02000023068

1. Entity Name **FPH PROPERTIES LLC**



Principal Place of Business Mailing Address

1902 AVENUE K C/O OUSTATCHER BROOKLYN, NY 11230 1902 AVENUE K C/O OUSTATCHER BROOKLYN, NY 11230

FILED May 23, 2006 8:00 am Secretary of State

04-24-2006 90060 037 ****50.00

30008886



| DO | NOT | WRITE | IN | THIS | SPA | CE |
|----|-----|--------------|----|-------|---------------------------|----|
| | | | | 11110 | $\mathbf{v}_{\mathbf{l}}$ | |

6. Name and Address of Current Registered Agent

CR2E083 (11/05)

| 4. FEI Number | Applied For | |
|----------------------------------|-----------------------------------|--|
| 11-3651151 | Not Applicable | |
| 5. Certificate of Status Desired | \$5.00 Additional Fee Required | |

04062006 No Chg-LLC

AGENTS AND CORPORATIONS, INC. DO NOT WRITE 773 4TH AVENUE NORTH SUITE E IN THIS SPACE NAPLES, FL 34102

| <u></u> | |
|---|--|
| 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the | e State of Florida, Lem familiar with, and accent. |
| | to order or remode round mility and decorpt |
| the obligations of registered agent. | |
| 1.4 40.30.1.1.4 3.1.4 3.1.4 3.1.4 3.1.4 3.1.4 3.1.4 3.1.4 3.1.4 3.1.4 3.1.4 3.1.4 3.1.4 3.1.4 3.1.4 3.1.4 3.1 | |

(MOTE: Redistanted Aconst planeture required when reinstation)

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

SIGNATURE

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|---|--|--|--|
| 9. MANAGING MEMBERS/MANAGERS | | | |
| TITLE MGRM NAME MNA MANAGEMENT LLC STREET ADDRESS 1902 AVENUE K CITY-ST-ZP BROOKLYN, NY 11230 | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | |
| TITLE NAME STREET ADDRESS CITY - ST-ZIP | DO NOT WRITE | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | IN THIS SPACE | | |
| TITLE MANCE STREET ADDRESS CITY-ST-ZIP | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | |

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 cath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to exegute this report as required by Chapter 608; Florida Statutes.

SIGNATURE: BIGHATURE AND TYPED OR PRINTED HAND, OF A KANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE 4/10/06

201-738-1703