

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000023956

Entity Name: ALTON BAY, LLC

FILED  
May 03, 2005  
Secretary of State

## Current Principal Place of Business:

3370 NE 190TH ST  
3211  
MIAMI, FL 33180

## New Principal Place of Business:

## Current Mailing Address:

3370 NE 190TH ST  
3211  
MIAMI, FL 33180

## New Mailing Address:

FEI Number: 57-1163429      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:

LEVY, JAY M PRES  
3370 NE 190TH ST.  
3211  
AVENTURA, FL 33180 US

## Name and Address of New Registered Agent:

LEVY, JAY M MGRM  
3370 NE 190TH ST.  
3211  
AVENTURA, FL 33180 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: JAY M. LEVY

05/03/2005

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete  
Name: LEVY, JAY M  
Address: 3370 NE 190TH ST., #3211  
City-St-Zip: AVENTURA, FL 33180

Title: MGRM ( ) Delete  
Name: LEVY, MITCHELL R  
Address: 3370 NE 190TH ST., # 3211  
City-St-Zip: AVENTURA, FL 33180

## ADDITIONS/CHANGES:

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JAY M. LEVY

MGRM

05/03/2005

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