2007 LIMITED LIABILITY COMPANY ANNUAL REPORT-

SIGNATURE:

Jan 12, 2007 08:00 AM **DOCUMENT # L02000031482 Secretary of State** A BROWARD COUNTY LLC Principal Place of Business Mailing Address PO BOX 22856 1361 N.W. 115 AVENUE FT LAUDERDALE, FL 33335 PLANTATION, FL 33323 01082007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 57-1141356 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent BOYLE-BURGUN, MARIA DO NOT WRITE 1361 N.W. 115 AVENUE PLANTATION, FL 33323 IN THIS SPACE 6. 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. Lam familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2007 9 MANAGING MEMBERS/MANAGERS MGRM BOYLE-BURGUN, MARIA NAME STREET ADDRESS 1361 N.W. 115 AVENUE CITY-ST-ZIP PLANTATION, FL 33323 U00000584556 01/12/07+30042+015 150.00 TIFLE NAME STREET ADDRESS CITY-ST-ZIP nne STREET ADDRESS DO NOT WRITE C/TY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS City-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information adcurant and the my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the life for trouved to execute this report as required by Chapter 808, Florida Statutes. 954 Maria Boyle-Burqun I hereby certify that the information indicated on this report is true and limited liability company or the received.

FILED