

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2006 8:00 am
Secretary of State

04-26-2006 90023 048 ****50.00

DOCUMENT # L03000009019					
1. Entity Name 427 SW 8 AVENUE, LLC					
Principal Place of Business 2700 NORTH BAY ROAD MIAMI BEACH, FL 33140			Mailing Address 2700 NORTH BAY ROAD MIAMI BEACH, FL 33140		
2. Principal Place of Business 6000 ISLAND BLVD.		3. Mailing Address 6000 ISLAND BLVD.			
Suite, Apt. #, etc. APT. 2003		Suite, Apt. #, etc. APT. 2003			
City & State AVENTURA		City & State AVENTURA			
Zip 33160-3788	Country USA	Zip 33160-3788	Country USA		
6. Name and Address of Current Registered Agent GREENBERG, MYRON 2700 NORTH BAY ROAD MIAMI BEACH, FL 33140				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 6000 ISLAND BLVD. APT. 2003 City AVENTURA	
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 <i>X</i>				Applied For Not Applicable	
Filing Fee is \$50.00 Due by May 1, 2006				Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM- GREENBERG, MYRON 2700 NORTH BAY ROAD MIAMI BEACH, FL 33140	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GREENBERG, MYRON 6000 ISLAND BLVD., #2003 AVENTURA, FL 33160-3788
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GREENBERG, SONDR 2700 NORTH BAY ROAD MIAMI BEACH, FL 33140	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GREENBERG, SONDR 6000 ISLAND BLVD., #2003 AVENTURA, FL 33160-3788
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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: <i>X</i>				Date: <i>4/22/06</i>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE				Daytime Phone #: <i>305-938-8288</i>	