2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000009128

FILED
Apr 29, 2005
Secretary of State

Entity Name: FIVE 34, LLC

Current Principal Place of Business:	**New Principal Place of Business:**
7925 NW 12TH ST., #407 MIAMI, FL 33126	7955 NW 12TH ST., #400 MIAMI, FL 33126

Current Mailing Address:	**New Mailing Address:**
7925 NW 12TH ST., #407 MIAMI, FL 33126	7955 NW 12TH ST., #400 MIAMI, FL 33126

FEI Number: 26-0062069   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
BERNER, CARLOS 7925 NW 12TH STREET, SUITE 407 MIAMI, FL 33126 US	BERNER, CARLOS 7955 NW 12TH STREET, SUITE 400 MIAMI, FL 33126 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: CARLOS BERNER   04/29/2005

Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MEMBERS: **ADDITIONS/CHANGES:**

Title:	MGRM ( ) Delete	Title:	MGRM (X) Change ( ) Addition
Name:	BERNER, CARLOS	Name:	BERNER, CARLOS
Address:	7925 NW 12TH ST #318	Address:	7955 NW 12TH ST #400
City-St-Zip:	MIAMI, FL 33126	City-St-Zip:	MIAMI, FL 33126

Title:	MGRM ( ) Delete	Title:	MGRM (X) Change ( ) Addition
Name:	BERNER, WENDY	Name:	BERNER, WENDY
Address:	7925 NW 12TH ST #318	Address:	7955 NW 12TH ST #400
City-St-Zip:	MIAMI, FL 33126	City-St-Zip:	MIAMI, FL 33126

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: CARLOS BERNER   MGRM   04/29/2005

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