## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L03000012790

1. Entity Name

1665 WASHINGTON AVENUE, LLC



FILED Jan 23, 2006 08:00 AN Secretary of State

Principal Place of Business

**1665 WASHINGTON AVENUE** 

PН

MIAMI BEACH, FL 33139

Mailing Address

1665 WASHINGTON AVENUE

PH

MIAMI BEACH, FL 33139



## DO NOT WRITE IN THIS SPACE

01132006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 06-1690920 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HOLLANDER, MARK PA 11410 NORTH KENDALL DRIVE SUITE 207 MIAMI, FL 33176

## DO NOT WRITE IN THIS SPACE

8. The above the obliga	e named entity submits this statement for the purpose of char ations of registered agent.	nging its registered office or registered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
ř	filing Fee is \$50.00 Due by May 1, 2006		
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR STERN, LYLE B 1665 WASHINGTON AVENUE PH MIAMI BEACH, FL 33139		900000534756 01/28/05-80024-008 SU.00
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 NAME STREET ADDRESS			

11. I hereby certify that the information supplied with this filling 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 expowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

11/18/106

305) 532-6100

Daytime Phone #