2006 LIMITED LIABILITY COMPANY ANNUAL REPORT FILED Apr 14, 2006 08:00 AN Secretary of State **DOCUMENT # L03000014423** 1. Entity Name SIXTEENTH STREET NORTH PROPERTY, L.L.C. Principal Place of Business Mailing Address 1210 16TH STREET NORTH 1210 16TH STREET NORTH ST. PETERSBURG, FL 33705 ST. PETERSBURG, FL 33705 04062006 No Cha-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 36-4535218 Not Applicable \$5.00 Additional 5. Certificate of Status Desired 5. Name and Address of Current Registered Agent FONTES, DAVID A DO NOT WRITE 4200 W. CYPRESS ST., STE. 479 TAMPA, FL 33607 IN THIS SPACE 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. 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, 2006 MANAGING MEMBERS/MANAGERS 9. MGRM me NATH, DWARKA G STREET ADDRESS 805 COLUMBUS DR. CITY-ST-ZIP TIERRA VERDE, FL 33715 TITLE U00000509528^M 04/28/06-80047-013 50.00^M STREET ADDRESS City-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE City-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS City-ST-ZIP TITLE NAME

11. I hereby certify that the information supplied with this filling does not clealify 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 flability company or title receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

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

> RIGHATURE AND TYPED OR PI KME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE