

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000016853

FILED  
Feb 28, 2006  
Secretary of State

Entity Name: KAHAN, SHIR & ASSOCIATES, P.L.

## Current Principal Place of Business:

1800 N.W. CORPORATE BLVD.  
SUITE 102  
BOCA RATON, FL 33431 US

## New Principal Place of Business:

## Current Mailing Address:

1800 N.W. CORPORATE BLVD.  
SUITE 102  
BOCA RATON, FL 33431 US

## New Mailing Address:

FEI Number: 55-0830122

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KAHAN, BRIAN A  
1800 N.W. CORPORATE BLVD.  
SUITE 102  
BOCA RATON, FL 33431 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: KAHAN, BRIAN A  
Address: 1800 N.W. CORPORATE BLVD., SUITE 102  
City-St-Zip: BOCA RATON, FL 33431

Title: MGRM ( ) Delete  
Name: SHIR, GUY M  
Address: 1800 NW CORPORATE BLVD, SUITE 102  
City-St-Zip: BOCA RATON, FL 33431

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: KAHAN, BRIAN A  
Address: 1800 N.W. CORPORATE BLVD., SUITE 102  
City-St-Zip: BOCA RATON, FL 33431

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: BRIAN A KAHAN

MGRM

02/28/2006

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