2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE: SIGNATURE AND THE OF FINITED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

FILED Mar 31, 2006 08:00 AM Secretary of State

DOCUMENT # L03000019324 1. Enlity Name BRICKELL HARDGOODS COMPANY, LLC		Secretary of State
Principal Place of Business 284 NE 79TH ST. MIAMI, FL 33138 Mailing Address 284 NE 79TH ST. MIAMI, FL 33138		
DO NOT WRITE IN THIS SP	PACE	03272006 No Chg-LLC
6. Name and Address of Current Registered Agent SHOR, ROBERT 284 NE 79TH ST. MIAMI, FL 33138		DO NOT WRITE 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 earlistered agent. Signature Signature Signature in the distribution of earlier agent agent and agent and 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 earlier agent a		
Filing Fee is \$50.00 Due by May 1, 2006		
9. MANAGING MEMBERS/MANAGERS TITLE MGR NAME SHOR, ROBERT A MGR STREET ADDRESS 284 N E 79TH ST GITY-ST-ZIP MIAMI, FL 3313B		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		U00000487405 04/13/86-80077-082 5 0, <i>0</i> 0
file Name Street address City-St- (IP		DO NOT WRITE
TULE GRANE STREET ADDRESS GITY-ST-ZP		IN THIS SPACE
TIVLE NAME STREET ADDRESS CITY-57-DP		
TITLE NAME SIRECT ADDRESS GIY-SI-ZIP		
11. I hereby certify that the information supplied with this fitting does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I turther 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 odin; that I am a managing member or manager of the fimited liability company or tips receiver or trustee employment to execute this report as required by Chapter 508, Florida Statutes.		