2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# L03000025605

Entity Name: 739 WASHINGTON, L.L.C.

Current Principal Place of Business:

2600 DOUGLAS RD., STE 908
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

2600 DOUGLAS RD., STE 908
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 56-2436121 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LUSTIG, ROY R
2600 DOUGLAS RD., STE 908
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

MORRIS, STUART
7000 W, PALMETTO PARK ROAD
310
BOCA RATON, FL 33433 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: STUART MORRIS 04/29/2005
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: P ( ) Delete
Name: POLSTING, ED
Address: 2600 DOUGLAS RD SUITE 908
City-St-Zip: CORAL GABLES, FL 33134

Title: V ( ) Delete
Name: POLSTING, JOAN
Address: 2600 DOUGLAS RD SUITE 908
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: POLSTING, ED
Address: 2600 DOUGLAS RD SUITE 908
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR (X) Change ( ) Addition
Name: POLSTING, JOAN
Address: 2600 DOUGLAS RD SUITE 908
City-St-Zip: CORAL GABLES, FL 33134

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: ED POLSKY MGR 04/29/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date