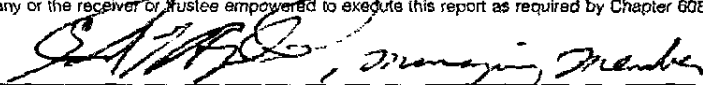


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 20, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000026308		
1. Entity Name CYPRESS CREEK BUSINESS CENTER, LLC		
Principal Place of Business 6499 N POWERLINE RD 301 FORT LAUDERDALE, FL 33309		Mailing Address 6499 N POWERLINE RD 301 FORT LAUDERDALE, FL 33309
DO NOT WRITE IN THIS SPACE		
		02022006 No Chg-LLC CRZE083 (11/05)
4. FEI Number 65-1201507		Applied For Not Applicable
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required
6. Name and Address of Current Registered Agent ROSENBERG, ARTHUR R 4875 N. FEDERAL HWY, 7TH FLOOR FORT LAUDERDALE, FL 33308		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 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		
9. MANAGING MEMBERS/MANAGERS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RENZULLI, EDWARD A 6499 N POWERLINE RD, STE 301 FORT LAUDERDALE, FL 33309	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
11. I hereby certify that the information supplied with this filing 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 empowered to execute this report as required by Chapter 608, Florida Statutes.		
SIGNATURE:  <i>Managing Member</i>		Date: 2-6-06 954 Daytime Phone #: 771-9900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE		Date Daytime Phone #