

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000027711

FILED
Jul 09, 2007
Secretary of State

Entity Name: BROWARD 2, LLC

Current Principal Place of Business:

601 BRICKELL KEY DRIVE, STE 604
MIAMI, FL 33131

New Principal Place of Business:

2627 S. BAYSHORE DR.
1503
MIAMI, FL 33133

Current Mailing Address:

601 BRICKELL KEY DRIVE, STE 604
MIAMI, FL 33131

New Mailing Address:

2627 S. BAYSHORE DR.
1503
MIAMI, FL 33133

FEI Number: 68-0562252 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

ARAZOZA & FERNANDEZ-FRAGA, PA
2100 SALZEDO STREET, SUITE 300
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

ARANA, EDUARDO MR.
2627 S. BAYSHORE DR.
1503
MIAMI, FL 33133 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: EDUARDO ARANA

07/09/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SMART CENTER HOLDING, S, LLC
Address: 601 BRICKELL KEY DRIVE, STE 604
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: THE TIGERSHARK GROUP, LLC
Address: 2627 S. BAYSHORE DR. APT. 1503
City-St-Zip: MIAMI, FL 33133 US

I hereby certify that the information supplied with this filing does not qualify 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: ROCIO MAGALLANES

MGR

07/09/2007

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