2006 LIMITED LIABILITY COMPANY

STREET ADDRESS CITY-ST-ZIP

May 01, 2006 8:00 am Secretary of State ANNUAL REPORT **DOCUMENT # L03000030011** 05-01-2006 90083 033 ****50 00 DADELAND PLAZA, LLC Principal Place of Business Mailing Address * ~ ~ 4 4 4 4 11 11 8725 N.W. 18TH TERRACE 8725 N.W. 18TH TERRACE **SUITE 105 SUITE 105** MIAMI, FL 33172 MIAMI, FL 33172 03242006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 42-1602256 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SMITH, STEPHEN H DO NOT WRITE **8725 N.W. 18TH TERRACE** IN THIS SPACE MIAMI, FL 33172 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 TITLE MGRM CR PARTNERS IV, LLC NAME STREET ADDRESS 8725 N.W. 18TH TERRACE, #105 CITY-ST-ZIP MIAMI, FL 33172 TITLE NAME STREET ADDRESS CITY-ST-ZIP ΤΠLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP NAME

FILED

SIGNATURE: SIGNATURE AND TYPED OR PRINTED N

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.