2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

Apr 26, 2005 8:00 am Secretary of State DOCUMENT # L03000031842 04-26-2005 90018 035 ****50.00 1. Entity Name 12740, L.L.C. Principal Place of Business Mailing Address 20047666 1428 BRICKELL AVE. 1428 BRICKFLL AVF. PENTHOUSE PENTHOUSE MIAMI, FL 33131 MIAMI, FL 33131 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04182005 Cha-LLC CR2E083 (10/03) City & State City & State 4. FEI Number Applied For 20-0241911 Not Applicable Zio Country Country Zip \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MANASTER, JOSHUA D ESQ. Street Address (P.O. Box Number is Not Acceptable) 1428 BRICKELL AVE. **PENTHOUSE** MIAMI, FL 33131 City Zip Code FL 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, 2005 Make check payable to Florida Department of State 9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES TITLE MGR Delete TITLE 📜 Change Addition BODEK, SHARON NAME NAME STREET ADDRESS 5018 OLD NEW UTREGHT RD. STREET ADDRESS CITY-ST-ZIP BROOKLYN, NY 11204 CITY-ST-ZIP TITLE TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SY-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME

11. Thereby certify that the information supplied with this filing does not qualify 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 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.

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3 aq - INDRAN BADER SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

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