2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 24, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000033605

1. Entity Name
3305 HOLDING COMPANY, LLC

Principal Place of Business	Mailing Address
1401 PONCE DE LEON BLVD., STE. 200 CORAL GABLES, FL 33134	1401 PONCE DE LEON BLVD., STE. 200 CORAL GABLES, FL 33134

DO NOT WRITE IN THIS SPACE

07182006No Chg-LLC CR2E083 (11/05)

4. FEI Number
80-0075389

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

LAW OFFICES OF CARRILLO & CARRILLO, P.A.
1401 PONCE DE LEON BLVD., STE. 200
CORAL GABLES, FL 33134

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by September 6, 2006

U00000572179
07/25/06-80019-014 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	REALASSIST, INC.
STREET ADDRESS	12915 SW 132 AVENUE
CITY-ST-ZIP	MIAMI, FL 33186
TITLE	MGRM
NAME	INFINITY DEVELOPERS, INC.
STREET ADDRESS	8999G SW 133 CT
CITY-ST-ZIP	MIAMI, FL 33186
TITLE	MGRM
NAME	MARK E. REARDON, INC.
STREET ADDRESS	15790 SW 88TH AVE
CITY-ST-ZIP	MIAMI, FL 33157
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: John S Miali 7/1/6 3053718459
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #