

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000035484

Entity Name: 360 DEGREES, LLC

FILED  
Jan 09, 2006  
Secretary of State

**Current Principal Place of Business:**

720 NE 69 STREET  
3N  
MIAMI, FL 33138

**New Principal Place of Business:**

**Current Mailing Address:**

720 NE 69 STREET  
3N  
MIAMI, FL 33138

**New Mailing Address:**

FEI Number: 11-3703703

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SHORACK, WILLIAM N  
901 NW 7TH STREET ROAD  
MIAMI, FL 33136 US

**Name and Address of New Registered Agent:**

SHORACK, WILLIAM N  
720 NE 69 STREET  
3N  
MIAMI, FL 33138 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:

01/09/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: RUIZ, AGUSTIN MANAGER  
Address: 720 NE 69 STREET , 3N  
City-St-Zip: MIAMI, FL 33138

Title: MGR ( ) Delete  
Name: SHORACK, WILLIAM N MANAGER  
Address: 720 NE 69 STREET, 3N  
City-St-Zip: MIAMI, FL 33138

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MBR (X) Change ( ) Addition  
Name: SHORACK, WILLIAM N MAN MBR  
Address: 720 NE 69 STREET, 3N  
City-St-Zip: MIAMI, FL 33138

I hereby certify that the information supplied with this filing does not qualify for the 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: WILLIAM NATHAN SHORACK

MBR

01/09/2006

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