

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 17, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # L03000038746**

1. Entity Name  
**HAMLET REALTY LLC**



Principal Place of Business

**7284 WEST PALMETTO PARK ROAD  
SUITE 210  
BOCA RATON, FL 33433**

Mailing Address

**7284 WEST PALMETTO PARK ROAD  
SUITE 210  
BOCA RATON, FL 33433**



04122006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number  
**05-0588404**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**5. Name and Address of Current Registered Agent**

**NEWMAN, TED  
7284 WEST PALMETTO PARK ROAD  
SUITE 210  
BOCA RATON, FL 33433**

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

*Ted Newman*  
Signature, typed or printed name of registered agent and title if applicable.

*(TED NEWMAN)*  
(NOTE: Registered Agent signature required when reinstating)

*April 13, 2006*  
DATE

**Filing Fee is \$50.00  
Due by May 1, 2006**

U00000516685  
05/01/06-80012-012 50.00

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGR  
NEWMAN, TED  
7284 WEST PALMETTO PARK ROAD SUITE 210  
BOCA RATON, FL 33433**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

*Ted Newman*

*Ted Newman*

*4/13/2006*

*561-495-7000*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #