

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000039397

FILED  
May 28, 2005  
Secretary of State

Entity Name: SAMMAY PROPERTIES LLC

**Current Principal Place of Business:**

POST OFFICE BOX 812287  
BOCA RATON, FL 33481

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 812287  
BOCA RATON, FL 33481

**New Mailing Address:**

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

ROSE, DANIEL J ESQ.  
201 NE 1ST AVENUE  
DELRAY BEACH, FL 33444 US

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

ROSE, DANIEL J ESQ.  
323 NE 6TH AVENUE  
DELRAY BEACH, FL 33444 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: DANIEL J ROSE

05/28/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: ROSE, DANIEL J  
Address: POST OFFICE BOX 812287  
City-St-Zip: BOCA RATON, FL 33481 US

Title: MGRM ( ) Delete  
Name: ROSE, GERARD A  
Address: 146 WEST 16H STREET  
City-St-Zip: NEW YORK, NY 10011 US

**ADDITIONS/CHANGES:**

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DANIEL J ROSE

MM

05/28/2005

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