

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 28, 2006 08:00 AM
Secretary of State

| | |
|---|---|
| DOCUMENT # L03000044069 1. Entity Name SK BELVEDERE ASSOCIATES, LLC |  |
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| Principal Place of Business 155 S. MIAMI AVE., PH-2-A MIAMI, FL 33130 | Mailing Address 155 S. MIAMI AVE., PH-2-A MIAMI, FL 33130 |
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04212006No Chg-LLC CR2E083 (11/05)

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| 4. FEI Number 20-0387331 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent PANTHER BELVEDERE, LLC 155 S. MIAMI AVE., PH-2-A MIAMI, FL 33130 |
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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 *[Signature]* 4-26-06
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 May 1, 2006**

U00000542015
05/10/06-80077-018 50.00

| 9. MANAGING MEMBERS/MANAGERS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM PANTHER BELVEDERE LLC 155 S MIAMI AVE PH 2A MIAMI, FL 33130 |
| 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: *[Signature]* 4/26/06
Date 305-374-2075
Daytime Phone #
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE