2006 LIMITED LIABILITY COMPANY ANNUAL REPORT . .

FILED DOCUMENT # L04000009511 Jan 23, 2006 08:00 AM Secretary of State FRAM FED ELEVEN, LLC Mailing Address Principal Place of Business 1500 N FEDERAL HWY #200 1500 N FEDERAL HWY #200 FORT LAUDERDALE, FL 33304 FORT LAUDERDALE, FL 33304 01182006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3781125 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MASTRIANA, F. RONALD DO NOT WRITE 1500 N FEDERAL HWY #200 FORT LAUDERDALE, FL 33304 IN THIS SPACE 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, 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 MANAGING MEMBERS/MANAGERS 9. TITLE NAME MASTRIANA, F. RONALD 1500 N FEDERAL HWY #200 STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE, FL 33304 000000344595 01/26/06-80016-016 50.00 TITLE NAME MASTRIANA, ALEXANDRA STREET ADDRESS 1500 NORTH FEDERAL HIGHWAY #200 CITY-ST-ZIP FORT LAUDERDALE, FL 33304 MGRM TILE O'MALLEY, DANIEL NAME STREET ADDRESS 1500 NORTH FEDERAL HIGHWAY #200 DO NOT WRITE CITY-ST-ZIP FORT LAUDERDALE, FL 33304 m r IN THIS SPACE 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 filling 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 of the receiver of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

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