2008 LIMITED LIABILITY COMPANY

FILED May 01, 2008 08:00 AN Secretary of State

	ANN	UAL REPORT	
DOCUMENT # 1. Entity Name NORTH BAY, LLC	L0400	0015825	
Principal Place of Business 4520 NORTH BAY ROAD MIAMI BEACH, FL 33141	US	Mailing Address 1707 L STREET, N.W. 400 WASHINGTON, DC 20036	US
		•	

6. Name and Address of Current Registered Agent



DO NOT WRITE IN THIS SPACE

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

03102008 No Chg-LLC CR2E083 (12/07)

Applied For 4. FEI Number **NOT APPLICABLE** Not Applicable \$5.00 Additional

5. Certificate of Status Desired

Fee Required

CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE

SIGNATURE_	Signature, typed or printed hame of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE	
FILE After May	NOW!!! FEE IS \$138.75 / 1, 2008 Fee will be \$538.75		000000941981 05/29/08-80002-011 143.75	
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SCHWARZ, DAVID M 4520 NORTH BAY ROAD MIAMI BEACH, FL 33141			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN T	HIS SPACE	
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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 or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.				

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