2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000018680

WATERWAY DEVELOPMENT AT HOLLYWOOD BEACH,

FILED Mar 16, 2006 08:00 AM Secretary of State

Principal Place of Business

9095 S.W. 87 AVENUE, SUITE 777

MIAMI, FL 33176

Mailing Address

9095 S.W. 87 AVENUE, SUITE 777 MIAMI, FL 33176



01112006 No Chg-LLC

CR2E083 (11/05)

	ECINA -1	
4.	FEI Number	
	20-0856302	
	2020858302	

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

6. Nam	a and Addr	ess of Curren	t Registered	Agent

MITCHELL, JAMES R 9095 S.W. 87 AVENUE, SUITE 777 MIAMI, FL 33176

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		}				
8. The above the obligat	e named entity submits this statement for the purpose of cha tions of registered agent.	nging its registere	d office or registered agent, or both,	In the State of Florida. I am familiar with, and accept		
SIGNATURE.	Signature, typed or printed neme of registered agent and the if applicable	NOTE: Desirband	Agent signature required when reinstating)	DATE		
		INDIE: NEGISIERO	Mann and resonation of when tours (south)	UNIC		
Ď.	iling Fee is \$50.00 ue by May 1, 2006					
9.	MANAGING MEMBERS/MANAGERS		<u> </u>			
TITLE MAME STREET ADDRESS CITY-ST-ZIP	MGRM MITCHELL, JAMES 9095 SW 87 AVENUE, SUITE 777 MIAMI, FL 33178			U00000469511		
HITLE NAME STREET ADDRESS CITY-ST-ZIP				03/27/06-80003-006 150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO 1	NOT WRITE		
TOTLE MAME STREET ADDRESS CITY-ST-ZIP		-	IN T	IN THIS SPACE		
TITLE NAME STREET ADORESS CUTY-ST-ZIP						
TITLE NAME STREET ADDRESS						

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.

SIGNATURE:

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

James R. Mitchell 03/13/06 305-270-0870