2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 12, 2005
Secretary of State

DOCUMENT# L04000035873

Entity Name: HALFA 2 & CO., LLC

Current Principal Place of Business:

20801 BISCAYNE BOULEVARD
SUITE 501
AVENTURA, FL 33180 US

New Principal Place of Business:

9990NW 14TH STREET
UNIT 107
MIAMI, FL 33172 US

Current Mailing Address:

20801 BISCAYNE BOULEVARD
SUITE 501
AVENTURA, FL 33180 US

New Mailing Address:

9990NW 14TH STREET
UNIT 107
MIAMI, FL 33172 US

FEI Number: 33-1091638 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEOPOLD, KORN & LEOPOLD, P.A.
20801 BISCAYNE BLVD.
SUITE 501
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR ( ) Change (X) Addition
Name: COHEN, FRANCK A MGR
Address: 9990NW 14TH STREET #107
City-St-Zip: MIAMI, FL 33172 US

Title: MGR ( ) Change (X) Addition
Name: COHEN, AGNES G MGR
Address: 9990NW 14TH STREET #107
City-St-Zip: MIAMI, FL 33172 US

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: FACOHEN MGR 01/12/2005

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