2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 13, 2005
Secretary of State

DOCUMENT# L04000039836

Entity Name: J.A.B. SHOPPING CENTER, L.L.C.

Current Principal Place of Business:

BAER'S FURNITURE CO., INC.
1589 NW 12TH AVENUE
POMPANO, FL 33069

New Principal Place of Business:

JAB SHOPPING CENTER LLC
4200 TAMIAMI TRAIL
PORT CHARLOTTE, FL 33952

Current Mailing Address:

BAER'S FURNITURE CO., INC.
1589 NW 12TH AVENUE
POMPANO, FL 33069

New Mailing Address:

FEI Number: 04-3793332 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BAER, RONALD W
BAER'S FURNITURE CO., INC.
1589 NW 12TH AVENUE
POMPANO, FL 33069 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: BAER, IRA J
Address: 1589 NW 12TH AVENUE
City-St-Zip: POMPANO BEACH, FL 33069

Title: MGR ( ) Change (X) Addition
Name: BAER, LAURENCE E
Address: 1589 NW 12TH AVENUE
City-St-Zip: POMPANO BEACH, FL 33069

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: IRA J. BAER MGR 04/13/2005

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