

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 11, 2005 8:00 am
Secretary of State

07-11-2005 90044 042 ****50.00

DOCUMENT # L04000040574

1. Entity Name
6 FEDERAL HIGHWAY SOUTH LLC



Principal Place of Business
**6 FEDERAL HIGHWAY SOUTH
DANIA BEACH, FL 33004**

Mailing Address
**6 FEDERAL HIGHWAY SOUTH
DANIA BEACH, FL 33004**

20062159



2. Principal Place of Business

3. Mailing Address

C/O ERIC ANSEL ESQ.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

601 SOUTH OCEAN DRIVE

City & State

City & State

HOLLYWOOD, FL

Zip

Country

Zip

33019

Country

FLORIDA

06222005 Chg-LLC CR2E083 (10/03)

4. FEI Number

20-3036562

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HOWARD ALLEN COHEN, ESQUIRE
C/O ATKINSON, DINER, STONE, MANKUTA & PLOU
1946 TYLER STREET
HOLLYWOOD, FL 33020**

Name

ERIC ANSEL ESQ.

Street Address (P.O. Box Number is Not Acceptable)

601 SOUTH OCEAN DRIVE

City

HOLLYWOOD

FL

Zip Code

33019

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

23 JUN 05

**Filing Fee is \$50.00
Due by September 7, 2005**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
SSI PROPERTIES, INC.
20 S. SANTA CRUZ AVENUE, SUITE 300
LOS GATOS, CA 95030**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
ERIC ANSEL ESQ.
601 SOUTH OCEAN DRIVE
HOLLYWOOD, FL 33019**

☒ Change

☐ Addition

TITLE
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☐ Change

☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify 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 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, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

23 JUN 05