


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Feb 27, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L04000042419</b> 1. Entity Name <b>HOLLYWOOD PLAZA, LLC</b>	
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Principal Place of Business <b>862 SUNFLOWER CIRCLE WESTON, FL 33327</b>	Mailing Address <b>862 SUNFLOWER CIRCLE WESTON, FL 33327</b>
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**DO NOT WRITE IN THIS SPACE**



02022006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number <b>20-1216101</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00</b> Additional Fee Required	

6. Name and Address of Current Registered Agent  <b>ALVARO CASTILLO B., P.A. 1390 BRICKELL AVENUE SUITE 200 MIAMI, FL 33131</b>
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**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

**Filing Fee is \$50.00  
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR FAERMAN, FABIO 862 SUNFLOWER CIRCLE WESTON, FL 33327</b>
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03/08/06 80063-024 50.00

11. I hereby certify that the information supplied with this filing 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 606, Florida Statutes.

**SIGNATURE:**  **MGR -** **2-1-06** **786 262 9966**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #