

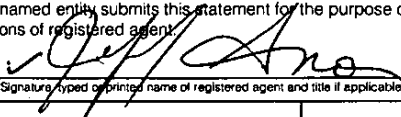
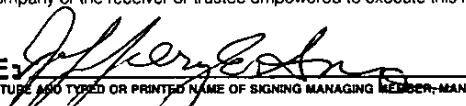


**2005 LIMITED LIABILITY COMPANY
AMENDED ANNUAL REPORT**

DOCUMENT # L04000046447				VJ 04/28/05 FILED 05 APR 20 PM 3:25 SECRETARY OF STATE TALLAHASSEE FLORIDA	
1. Entity Name 136 BBB PROPERTY, LLC					
Principal Place of Business 10689 HERITAGE BOULEVARD LAKE WORTH, FL 33467		Mailing Address 10689 HERITAGE BOULEVARD LAKE WORTH, FL 33467			
2. Principal Place of Business		3. Mailing Address P.O. Box 1208			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03282005 Chg-LLC CR2E083 (10/03)	
City & State		City & State Boca Raton, FL		4. FEI Number 20-1273046	
Zip		Zip 33429		Country USA	
Country		Country USA		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
THOMAS, DONALD J ESQ 1200 NORTH FEDERAL HIGHWAY, STE. 312 BOCA RATON, FL 33432			Name Jeffrey E. Snow		
			Street Address (P.O. Box Number is Not Acceptable) 781 SW 2nd Street		
			City Boca Raton		
			FL		
			Zip Code 33486		
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 				3.28.05	
Signature typed or printed name of registered agent and title if applicable				(NOTE: Registered Agent signature required when reinstating)	
DATE				DATE	
Amended AR is \$50.00		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE	MGR	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCROGGIE, ARTURO		NAME	400054032474	
STREET ADDRESS	10689 HERITAGE BOULEVARD		STREET ADDRESS	05/09/05--01004--004	**55.00
CITY-ST-ZIP	LAKE WORTH, FL 33467		CITY-ST-ZIP		
TITLE	MGR	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DECAPITO, ROGER B		NAME		
STREET ADDRESS	10689 HERITAGE BLVD		STREET ADDRESS		
CITY-ST-ZIP	LAKE WORTH, FL 33467		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	MGR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	Jeffrey E. Snow	
STREET ADDRESS			STREET ADDRESS	781 SW 2nd Street	
CITY-ST-ZIP			CITY-ST-ZIP	Boca Raton, FL 33486	
TITLE		<input type="checkbox"/> Delete	TITLE	MGR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	Richard Bowman	
STREET ADDRESS			STREET ADDRESS	14339 Smith Sundry Road	
CITY-ST-ZIP			CITY-ST-ZIP	Delray Beach, FL 33446	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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: 		Jeffrey E. Snow		3/28/05 (56) 392-5586	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date		Daytime Phone #	