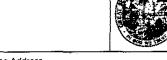
2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000049532

1. Entity Name

BERNSTEIN REALTY LLC



Principal Place of Business P. O. BOX 810664 BOCA RATON, FL 33481

Mailing Address P. O. BOX 810664

BOCA RATON, FL 33481

FILED Jan 23, 2006 08:00 AN **Secretary of State**



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

01112006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number Applied For 20-1348457 Not Applicable \$5.00 Additional

5. Certificate of Status Desired

Fee Required

Daytime Phone #

HERMAN MOSKOWITZ CPA, PA 3850 HOLLYWOOD BLVD SUITE 204 HOLLYWOOD, FL 33021

the obligations of registered agent.

SIGNATURE:

DO NOT WRITE IN THIS SPACE

SIGNATURE.	Signature, typed or printed name of registered agent and little II applicable	[NOTE Registered Agont signature required when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2006			
9.	MANAGING MEMBERS/MANAGERS		the second secon
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BERNSTEIN, STEVEN E P.O. BOX 810664 BOCA RATON, FL 334810664		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			:100000394543 01/26/06-80019-015 50.00
NITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
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HTLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE HAME STREET ADDRESS CITY-ST-ZIP			
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 608, Florida Statutes.			

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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