2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 28, 2006 8:00 am Secretary of State

DOCUMENT # L0400056154 1. Entity Name OCEAN PALM INVESTMENTS, LLC					04-28-2006 9	90034 015 ****50	.00	
Principal Place	e of Business	Mailing Address		_	~100	9690		
		236 9TH STREET	*					
MIAMI BEACH, FL 33139 US		MIAMI BEACH, FL 33139 US						
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a Discussion	l (O	& Mailian Address		<u> </u>				
2. Principal Place of Business		3. Mailing Address					0 0 1	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04492006	01-110	0005000 (44/05)		
				04182006	Chg-LLC	CR2E083 (11/05)		
City & State	э	City & State		4. FEI Numb		· · · · · · · · · · · · · · · · · · ·	plied For	
7:0	Country	Zip	Country	36-455	8720		t Applicable	
Zip	Country	Zip	Country	5. Certificate	of Status Desired	□ \$5.00 Add Fee Require	itional d	
	6. Name and Address of Current	t Registered Agent		7. Name and	Address of New F	Registered Agent		
			Name	Name				
WEISS, JONATHAN			Street Address	Street Address (P.O. Box Number is Not Acceptable)				
236 9TH STREET MIAMI BEACH, FL 33139			Stilder Addres	Street Address (P.O. Box Number is Not Acceptable)				
WIFAWA DEF	ACH, 1 E 33133							
			City			FL Zip Cod	e	
								
	named entity submits this statement fi	or the purpose of changing its	s registered office or regis	stered agent, or bo	th, in the State of H	forida. I am tamiliar with,	and accept	
_								
SIGNATURE .	5 Signature, typed or printed name of registered agen	t and title if applicable. (NOT	E: Registered Agent signature requ	uired when reinstating)		DATE		
Fi	/ // /							
	iling Fee is \$50.00					ke check payable to	_	
	ue by May 1, 2006					ke check payable to la Department of Stat	e	
		ERS/MANAGERS	10.			la Department of State	e	
Di	ue by May 1, 2006	ERS/MANAGERS	10.		Florid	la Department of State	e Addition	
9. TITLÉ NAME	MANAGING MEMB MGRM A WEISS BARBARA				Florid	A Department of State		
9. THE NAME STREET ADDRESS	MANAGING MEMB MGRM WEISS BARBARA 236 9TH STREET		TITLE NAME STREET ADDRESS		Florid	A Department of State		
9. THE NAME STREET ADDRESS CITY-SI-ZIP	MANAGING MEMB MGRM A WEISS BARBARA	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Florid	la Department of Stat	☐ Addition	
9. THE NAME STREET ADDRESS CITY-SI-ZIP THE	MANAGING MEMB MGRM WEISS BARBARA 236 9TH STREET		TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		Florid	A Department of State		
9. 101LE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME	MANAGING MEMB MGRM WEISS BARBARA 236 9TH STREET MIAMI BEACH, FL 33139	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		Florid	la Department of Stat	☐ Addition	
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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.

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