


**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**May 26, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # L04000065493**

1. Entity Name  
**DOWNTOWN SHOPS, LLC**



Principal Place of Business <b>16375 NE 18 AVENUE          SUITE 304          NORTH MIAMI BEACH, FL 33162</b>	Mailing Address <b>19333 COLLINS AVESTE 406          SUNNY ISLES BEACH, FL 33160</b>
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03152006 No Chg-LLC CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>20-1721575</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

**JAFDIE, JOSE  
 19333 COLLINS AVE STE 406  
 SUNNY ISLES, FL 33160**

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

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

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SAFDIE, JOSE 16375 NE 18 AVENUE, SUITE 304 NORTH MIAMI BEACH, FL 33162
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 05/26/06-80003-004 50.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 118, 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, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #