FILED Apr 23, 2007 08:00 A Secretary of State

626-938-1988

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:

DOCUMENT # L0400067302 1. Entity Name EPHRAIM BARTOW, LLC			•
Principal Place of Business 4661 JOHNSON ROAD, SUITE 7 COCONUT CREEK, FL 33073 Mailing Address 2155 E. GARVEY AVE. NORTH SUITE B-18 WEST COVINA, CA 91791			
DO NOT WRITE IN THIS SPACE			04192007 No Chg-LLC CR2E083 (11/05) 4. FEI Number
6. Name and Address of Current Registered Agent HSU, ANDREW 4661 JOHNSON ROAD, SUITE 7 COCONUT CREEK, FL 33073			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 Signature, typed or printed name of registered agent and titls if applicable. (NOTE: Registered Agent signature required when reinstatung) DATE Filling Fee is \$50.00 Due by May 1, 2007			
	MANACING MEMBERG MANAGERS		
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MANAGING MEMBERS/MANAGERS MGRM HSU, ANDREW 2155 E. GARVEY AVE. NORTH, SUITE B-18 WEST COVINA, CA 91791		U00000724786 05/02/07-80125-020 50 00
CITY-ST-ZIP TITLE NAME SIREET ADDRESS CITY-ST-ZIP			DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
11. I hereby certify that the information supplied with this filing toes not qualify for the exemptions contained in Chapter 119, Florida Statutes. Lituriher 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 repeiver or trustee employeed to execute this report as required by Chapter 608, Florida Statutes.			

Andrew Hsu, Manager