

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 12, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000069475

1. Entity Name
UNIVERSITY 3396, LLC



Principal Place of Business
**2600 ISLAND BOULEVARD, UNIT APT 705
AVENTURA, FL 33160**

Mailing Address
**2600 ISLAND BOULEVARD, UNIT APT 705
AVENTURA, FL 33160**



01092006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1658881

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**ROSEN, BORIS
150 S.E. 2ND AVENUE, SUITE 1200
MIAMI, FL 33131**

**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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

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

000000384856
01/17/06-80032-011 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE **P**
NAME **HALAC, EDGAR**
STREET ADDRESS **2600 ISLAND BOULEVARD APT 705**
CITY- ST- ZIP **AVENTURA, FL 33160**

TITLE **V**
NAME **HALAC, FERNANDO**
STREET ADDRESS **2600 ISLAND BOULEVARD APT 705**
CITY- ST- ZIP **AVENTURA, FL 33160**

TITLE **TS**
NAME **GEBLSPAN, BERNARDO G**
STREET ADDRESS **2600 ISLAND BOULEVARD APT 705**
CITY- ST- ZIP **AVENTURA, FL 33160**

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CITY- ST- ZIP

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IN THIS SPACE**

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: _____

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

EDGAR HALAC

Date

Daytime Phone #

1-9-2006