2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000070748

1. Entity Name 1118 LINCOLN ROAD, LLC



FILED
May 03, 2006 08:00 AM
Secretary of State

Principal Place of Business

Mailing Address

1118 LINCOLN ROAD MIAMI BEACH, FL 33139 5111 PINE TREE DRIVE MIAMI BEACH, FL 33140



05012006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number	[Applied For	
20-1691494	Not Applica	ble
5. Certificate of Status Desired	\$5.00 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

LICKSTEIN, FRED K ESQ 100 S.E. 2ND STREET, 17TH FLOOR MIAMI, FL 33131

DO NOT WRITE IN THIS SPACE

grant of the control	
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 obligations of registered agent.	th, and accept
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	
9. MANAGING MEMBERS/MANAGERS	
IIILE MGR NAME AL-FASSI, TAREK SIREET ADDRESS 5111 PINE TREE DRIVE CITY-SI-ZIP MIAMI BEACH, FL 33140	
TITLE NAME U00000562117 STREET ADDRESS CITY-ST-ZIP U00000562117 U5/19/06-80043-019	50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP DO NOT WRITE	
TITLE NAME SIREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-SY-ZIP TITLE	

11. I hereby cortify that the information subgrided 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 hat 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 of the receiver or russes employee d to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE

STREET ADDRESS CITY-ST-ZIP

TAKER ALPASLI

5/1/06

(305) 368-869

Daytime Phone