

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000070778

Entity Name: 2000 N. FEDERAL, L.L.C.

FILED
Jan 25, 2005
Secretary of State

Current Principal Place of Business:

24 PADDINGTON ROAD
SCARSDALE, NY 10583

New Principal Place of Business:

Current Mailing Address:

24 PADDINGTON ROAD
SCARSDALE, NY 10583

New Mailing Address:

FEI Number: 20-1747153

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRALL, MARK L
616 E. ATLANTIC AVENUE
DELRAY BEACH, FL 33483 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: BEKIROW, HUSEYIN M
Address: 24 PADDINGTON ROAD
City-St-Zip: SCARSDALE, NY 10583

Title: () Delete
Name:
Address:
City-St-Zip:

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City-St-Zip:

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Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BEKIROW, HUSEYIN M MGRM
Address: 24 PADDINGTON ROAD
City-St-Zip: SCARSDALE, NY 10583

Title: MGR () Change (X) Addition
Name: BEKIROV, HUSEYIN M MGRM
Address: 24 PADDINGTON RD.
City-St-Zip: SCARSDALE, NY 10583

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Title: MGR () Change (X) Addition
Name: BEKIROV, HUSEYIN M MGRM
Address: 24 PADDINGTON RD.
City-St-Zip: SCARSDALE, NY 10583

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: HUSEYIN M. BEKIROV

MGR

01/25/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date