2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000070913

Entity Name: SOLE UNIT 602, LLC

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

60 ECHO RIDGE ROAD

MAJCHRZYK, AMY

140 8TH AVENUE, 4E

NEW YORK, NY 11215

MGRM

UPPER SADDLE RIVER, NJ 07458

() Delete

FILED Jan 04, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 17315 COLLINS AVENUE SUITE 602 SUNNY ISLES BEACH, FL 33160 **Current Mailing Address: New Mailing Address:** 500 EAST 85TH STREET NEW YORK, NY 10028 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KINGDOM REALTY KINGDOM REALTY 900 WEST 49TH STREET 1550 NORTHEAST MIAMI GARDENS DRIVE NORTH MIAMI, FL 33179 508 HIALEAH, FL 33012 US 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: 01/04/2007 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete CEVA, VALERIE A Name: Name: Address: 500 EAST 85TH STREET, 19D Address: City-St-Zip: NEW YORK, NY 10028 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: LAGANA, CHRISTINE E Name:

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

() Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: VALERIE CEVA MGRM 01/04/2007