2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 29, 2005
Secretary of State

DOCUMENT# L04000071249

Entity Name: DELIN15901 LLC

Current Principal Place of Business:

15901 BISCAYNE BOULEVARD
AVANTI CENTER
NORTH MIAMI BEACH, FL 33160

New Principal Place of Business:

15979 BISCAYNE BOULEVARD
AVANTI CENTER
NORTH MIAMI BEACH, FL 33160

Current Mailing Address:

3670 NE 201ST STREET
COUNTRY CLUB ESTATES
AVENTURA, FL 33180

New Mailing Address:

FEI Number: 20-1708201 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

DIBONO, DEBRA
3670 NE 201ST STREET
COUNTRY CLUB ESTATES
AVENTURA, FL 33180 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/MANAGERS:

Title: PRES ( ) Delete
Name: CHODOROW, LINDA
Address: 3670 NE 201ST STREET
City-St-Zip: AVENTURA, FL 33180

Title: VP ( ) Delete
Name: DIBONO, DEBRA
Address: 3670 NE 201ST STREET
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: DEBRA DIBONO VP 06/29/2005

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