

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000073333

FILED
Feb 28, 2006
Secretary of State

Entity Name: SHORE SQUARE INVESTMENT, LLC

Current Principal Place of Business:

6340 SW 72ND STREET
MIAMI, FL 33143 US

New Principal Place of Business:

Current Mailing Address:

7785 NW 146 ST
MIAMI LAKES, FL 33016 US

New Mailing Address:

FEI Number: 20-1985741

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERT A. BRANDT, P.A.
1110 BRICKELL AVENUE
PH-1
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

ROBERT A. BRANDT, P.A.
696 NE 125 ST
N MIAMI, FL 33161 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:

02/28/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CABRERIZO, TOMAS
Address: 6340 SW 72 STREET
City-St-Zip: MIAMI, FL 33143 US

Title: MGRM () Delete
Name: KATTAN, JAMES
Address: 2335 N.E. 209 STREET
City-St-Zip: N. MIAMI BEACH, FL 33180 US

Title: MGRM () Delete
Name: KATTAN, OREN
Address: 19333 COLLINS AVENUE, #PH-9
City-St-Zip: SUNNY ISLES, FL 33160 US

ADDITIONS/CHANGES:

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

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 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: OREN KATTAN

M

02/28/2006

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