

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000076813

FILED
Jul 11, 2005
Secretary of State

Entity Name: EYE OF HORUS REALTY, LLC

Current Principal Place of Business:

6001 S.W. 70TH STREET, #525
SOUTH MIAMI, FL 33143

New Principal Place of Business:

9325 GLADES ROAD
SUITE 201
BOCA RATON, FL 33434

Current Mailing Address:

6001 S.W. 70TH STREET, #525
SOUTH MIAMI, FL 33143

New Mailing Address:

6001 S.W. 70TH STREET
APT 525
SOUTH MIAMI, FL 33143

FEI Number: 20-2346810 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

Name and Address of New Registered Agent:

BELLOTTE, BRENT M.D.
6001 S.W. 70TH STREET, #525
SOUTH MIAMI, FL 33143 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

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

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

ADDITIONS/CHANGES:

Title: PRES () Change (X) Addition
Name: BELLOTTE, BRENT W MD
Address: 6001 SW 70TH STREET, APT. 525
City-St-Zip: SOUTH MIAMI, FL 33143

Title: VP () Change (X) Addition
Name: HABASH, RANYA G MD
Address: 6001 SW 70TH STREET, APT. 525
City-St-Zip: SOUTH MIAMI, FL 33143

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: BRENT BELLOTTE, MD

PRES

07/11/2005

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