

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000083621

**FILED**  
**Jan 19, 2006**  
**Secretary of State**

**Entity Name:** EMPRESS, LLC

**Current Principal Place of Business:**

9655 SOUTH DIXIE HIGHWAY  
3RD FLOOR  
MIAMI, FL 33156

**New Principal Place of Business:**

2525 PONCE DE LEON BLVD.  
5 TH FLOOR  
MIAMI, FL 33134

**Current Mailing Address:**

9655 SOUTH DIXIE HIGHWAY  
3RD FLOOR  
MIAMI, FL 33156

**New Mailing Address:**

2525 PONCE DE LEON BLVD.  
5 TH FLOOR  
MIAMI, FL 33134

**FEI Number:** 20-1998479

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SHEER, EMERY B  
9655 SOUTH DIXIE HIGHWAY  
3RD FLOOR  
MIAMI, FL 33156 US

**Name and Address of New Registered Agent:**

SHEER, EMERY B  
2525 PONCE DE LEON BLVD.  
5 TH FLOOR  
MIAMI, FL 33134 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:

01/19/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: SHEER, EMERY B  
Address: 9655 SOUTH DIXIE HIGHWAY, 3RD FLOOR  
City-St-Zip: MIAMI, FL 33156

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: SHEER, EMERY B  
Address: 2525 PONCE DE LEON BLVD., 5TH FLOOR  
City-St-Zip: MIAMI, FL 33134

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: EMERY B. SHEER

MGR

01/19/2006

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