


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 18, 2006 8:00 am
Secretary of State

08-18-2006 90028 005 ****50.00

DOCUMENT # L04000084780	
1. Entity Name 417 PROPERTIES, LLC	

Principal Place of Business 417 SOUTHEAST 12 COURT FORT LAUDERDALE, FL 33315 7651-3 S. Aragon Blvd. Sunrise FL 33322	Mailing Address 1802 N. UNIVERSITY DRIVE SUITE 102-316 PLANTATION, FL 33322
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07042006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 41-2159992	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent SARIOL, MARIA D ESQ 2199 PONCE DE LEON BOULEVARD SUITE 301 CORAL GABLES, FL 33324

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Candace A. Rosato Candace A. Rosato August 15, 2006
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing) DATE

**Filing Fee is \$50.00
Due by September 6, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ROSATO, FRED 1802 N. UNIVERSITY DRIVE SUITE 102-316 PLANTATION, FL 33322
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ROSATO, CANDACE A 1802 N. UNIVERSITY DRIVE SUITE 102-316 PLANTATION, FL 33322
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Candace A. Rosato Candace A. Rosato 954 578 5162
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE DAY 8/15/06 Daytime Phone #