

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000090746

FILED
Jul 15, 2005
Secretary of State

Entity Name: SUNNY HILLS HOLDINGS, LLC

Current Principal Place of Business:

4340 SHERIDAN STREET 2ND FL
HOLLYWOOD, FL 33021

New Principal Place of Business:

3137 NE 163RD STREET
NORTH MIAMI BEACH, FL 33160

Current Mailing Address:

4340 SHERIDAN STREET 2ND FL
HOLLYWOOD, FL 33021

New Mailing Address:

3137 NE 163RD STREE
NORTH MIAMI BEACH, FL 33160

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

SCHULMAN, BENJAMIN R
4340 SHERIDAN STREET 2ND FL
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

WOLF, NATALIA
3137 NE 163RD STREET
NORTH MIAMI BEACH, FL 33160 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: NATALIA WOLF

07/15/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BENSKY, SERGEY
Address: 4340 SHERIDAN STREET 2ND FL
City-St-Zip: HOLLYWOOD, FL 33021

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: WOLF, NATALIA
Address: 3137 NE 163RD STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33160

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: NATALIA WOLF

MGR

07/15/2005

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