


**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

<b>DOCUMENT # L05000002623</b>	
1. Entity Name THE SHOPS OF BIRD ROAD, LLC	

Principal Place of Business 48 EAST FLAGLER STREET, STE. 379 MIAMI, FL 33131	Mailing Address 48 EAST FLAGLER STREET, STE. 379 MIAMI, FL 33131
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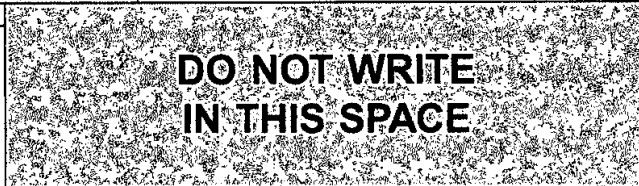


03062008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 59-2388302	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

AMKE REGISTERED AGENTS, L.L.C.  
2250 SUNTRUST INTERNATIONAL CENTER  
ONE S.E. THIRD AVENUE  
MIAMI, FL 33131

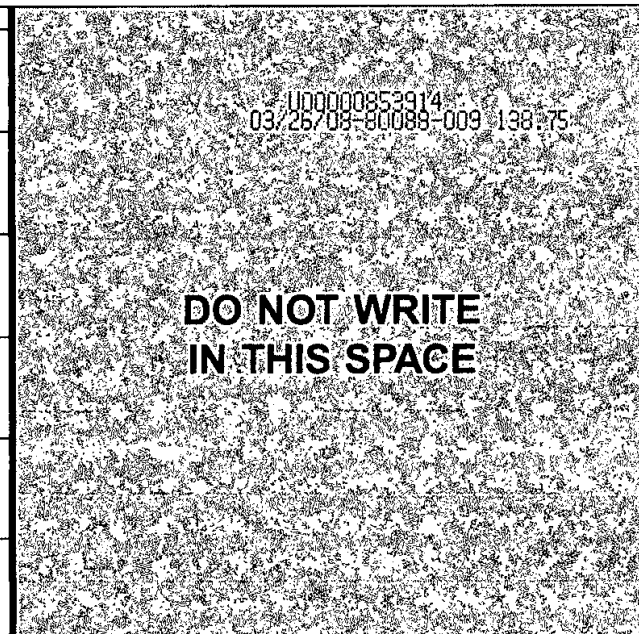


8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

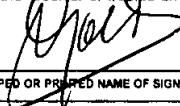
SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GOLD, SALOMON 48 E FLAGLER ST STE 379 MIAMI, FL 33131
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	



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:  Salomon Gold, Manager 3/6/08 305-374-5546

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #