

**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Jul 07, 2006  
Secretary of State**

DOCUMENT# L05000005618

Entity Name: 3D REALTY FLORIDA, LLC

**Current Principal Place of Business:**

6557 COPPER RIDGE TRAIL  
UNIVERSITY PARK, FL 34201

**New Principal Place of Business:**

**Current Mailing Address:**

6557 COPPER RIDGE TRAIL  
UNIVERSITY PARK, FL 34201

**New Mailing Address:**

FEI Number: 20-2239636      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:**

BREEZE, JAMES  
6557 COPPER RIDGE TRAIL  
UNIVERSITY PARK, FL 34201      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:**

**ADDITIONS/CHANGES:**

Title: MGRM      ( ) Delete  
Name: DELIA, DOMENICK  
Address: 3 KNELL DRIVE  
City-St-Zip: MASSAPEQUA PARK, NY 11762

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM      ( ) Delete  
Name: BREEZE, JAMES  
Address: 6557 COPPER RIDGE TRAIL  
City-St-Zip: UNIVERSITY PARK, FL 34201

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: DOMENICK DELIA

PRES

07/07/2006

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