

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000008989

Entity Name: JADE BEACH 4205, LLC

FILED
May 31, 2006
Secretary of State

Current Principal Place of Business:

17001 COLLINS AVE
SUNNY ISLES BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

14 PEACH TREE LANE
MARALAPAN, NJ 07726

New Mailing Address:

14 PEACH TREE LANE
MANALAPAN, NJ 07726

FEI Number: 20-4523829 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:

KAPLAN, MICHAEL
16875 COLLINS AVENUE
SUNNY ISLES BEACH, FL 33120 US

Name and Address of New Registered Agent:

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:

Title: MGRM () Delete
Name: KAPLAN, MICHAEL
Address: 14 PEACH TREE LANE
City-St-Zip: MARALAPAN, NJ 07726

Title: MGRM () Delete
Name: MESHOYRER, SVETLANA
Address: 14 PEACH TREE LANE
City-St-Zip: MARALAPAN, NJ 07726

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: KAPLAN, MICHAEL
Address: 14 PEACH TREE LANE
City-St-Zip: MANALAPAN, NJ 07726

Title: MGRM (X) Change () Addition
Name: MESHOYRER, SVETLANA
Address: 14 PEACH TREE LANE
City-St-Zip: MANALAPAN, NJ 07726

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: MICHAEL KAPLAN

MGR

05/31/2006

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