### 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT # L05000014875

1. Entity Name

LAKEVIEW 26 HOLDINGS, LLC



Principal Place of Business

4434 N. BAY ROAD MIAMI BEACH, FL 33140 Mailing Address 4434 N. BAY ROAD

MIAMI BEACH, FL 33140

## FILED Apr 29, 2008 8:00 am Secretary of State

04-29-2008 90026 045 \*\*\*138.75



### DO NOT WRITE IN THIS SPACE

04232008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-2417309

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BLODIG, GREGORY J 100 W. CYPRESS CREEK ROAD, SUITE 700 FORT LAD DERDALE, FL 33309 \

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|           | -   |   |  |
|-----------|---|---|--|
|           | e named entity submits this statement for the purpose of chilons of registered agent. | nanging its registered office or registered agent, or both, in the St | ate of Florida. I am familiar with, and accept |
| SIGNATURE | Signature, typed or printed films of its Lighted agent and title if applicable.       | (NOTE: Registered Agent signature required when reinstating)          | DATE   |
|           | 7   |   |  |

#### FILE NOW!!! FEE IS \$138,75 After May 1, 2008 Fee will be \$538.75

| • 11°  |  |  |  |
|--|--|--|--|
| 9.   | MANAGING MEMBERS/MANAGERS  |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP          | MGR<br>BIETACHON MANAGEMENT CORP.<br>4434 N. BAY ROAD<br>MIAMI BEACH, FL 33140 |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP          |  |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP          |  |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP          |  |  |  |

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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 trusted empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING MANY

SING MEMBER, OR AUTHORIZED REPRESENTATIVE

04-28-08

Da

Daytime Phone #