2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 14, 2007
Secretary of State

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Entity Name: ISLAND SHOPPES, L.L.C.

Current Principal Place of Business:

3696 N FEDERAL HIGHWAY
200
FORT LAUDERDALE, FL 33308 US

New Principal Place of Business:

Current Mailing Address:

3696 N FEDERAL HIGHWAY
200
FORT LAUDERDALE, FL 33308 US

New Mailing Address:

FEI Number: 20-2739080 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

QUAILEY, BRUCE MGRM
3696 N FEDERAL HIGHWAY
200
FORT LAUDERDALE, FL 33308 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:	MR	( ) Delete
Name:	QUALEY, BRUCE S MGRM	
Address:	3696 N FEDERAL HIGHWAY SUITE 200	
City-St-Zip:	FT LAUDERDALE, FL 33308 US	
Title:	MR	( ) Delete
Name:	COHEN, DANIEL J MGRM	
Address:	C/O FIRSTEVERGREEN, 101 EISENHOWER PKWY	
City-St-Zip:	ROSELAND, NJ 07068 US	
Title:	MR	( ) Delete
Name:	GOLDMEIER, LEE S MGRM	
Address:	C/O CREATIVE CAPITAL 61 S.PARAMUS ROAD	
City-St-Zip:	PARAMUS, NJ 07652 US	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: LEE GOLDMEIER MGRM 03/14/2007

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