
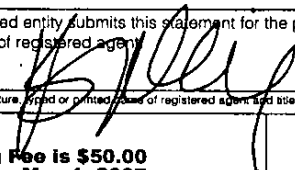
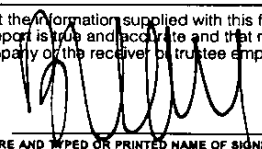


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 10, 2007 8:00 am
Secretary of State

04-10-2007 90080 027 ****50.00

DOCUMENT # L05000029302 1. Entity Name VAN BUREN PROPERTY HOLDINGS, LLC					
Principal Place of Business 235 SOUTH 21ST AVE HOLLYWOOD, FL 33020			Mailing Address 235 SOUTH 21ST AVE HOLLYWOOD, FL 33020		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address 1040 S. Federal Hwy			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State Hollywood, FL 33020		03302007 Chg-LLC CR2E083 (12/06)	
Zip		Country		4. FEI Number 20-2572196	
City & State		City & State Hollywood, FL 33020		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
Zip		Country US		Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent WEINKLE, BARNEY 2408 HOLLYWOOD BOULEVARD HOLLYWOOD, FL 33020				7. Name and Address of New Registered Agent Name Barney Weinkle Street Address (P.O. Box Number is Not Acceptable) 1040 S. Federal Hwy City Hollywood FL Zip Code 33020	
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  Barney Weinkle MGRM DATE 3/30/07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$50.00 Due by May 1, 2007			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM WEINKLE, BARNEY 235 SOUTH 21ST AVE HOLLYWOOD, FL 33020	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM WEINKLE, BARNEY 1040 S. Federal Hwy Hollywood, FL 33020	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	 	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	 	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	 	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: 			Barney Weinkle MGRM 3/30/07 954 926-0481		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>					