2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

Mar 22, 2006 8:00 am Secretary of State **DOCUMENT # L05000031949** 03-22-2006 90289 008 ****50.00 1. Entity Name 900 80 STREET, LLC Principal Place of Business Mailing Address 9532 BYRON AVENUE 701 BRICKELL AVENUE, STE. 3000 200 18765 SURFSIDE, FL 33154 MIAMI, FL 33131 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03092006 CR2E083 (11/05) Chg-LLC City & State City & State Applied For 4. FEI Number 20-2692446 Not Applicable Zip Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent INTRASTATE REGISTERED AGENT CORPORATION Street Address (P.O. Box Number is Not Acceptable) 701 BRICKELL AVENUE, STE. 3000 MIAMI, FL 33131 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Fillng Fee Is \$50.00 Due by May 1, 2006 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. MGR ☐ Change ☐ Addition TITLE ☐ Delete TITLE LEHMAN, JEFF NAME 9532 BYRON AVENUE STREET ADDRESS STREET ADDRESS CTTY-ST-ZIP SURFSIDE, FL 33154 CITY-ST-ZIP TITLE MGR ☐ Delete ☐ Change ☐ Addition CRUZ, PEDRO NAME NAME 9532 BYRON AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SURFSIDE, FL 33154 CITY-ST-ZIP Delete ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-\$T-ZIP CITY-ST-ZIP Delete ☐ Change TITLE TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-72P CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-\$T-ZIP Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

FILED

ATTACHMENT

UNANIMOUS WRITTEN CONSENT OF THE MEMBERS OF

900 80 STREET. LLC

The undersigned, constituting all of the Members of 900 80 STREET, LLC, a Florida Limited Liability Company (hereinafter "Company"), hereby adopt this Unanimous Written Consent in lieu of the Meeting of said Members, waive all notice of the time, place and object of such meeting, and consent to, ratify, approve and adopt the following as the acts of such Member(s) and as corporate resolutions:

RESOLVED, that the following individuals serving as Managers of the Company are hereby reappointed to serve as Managers of the Company until their successors are duly elected or appointed and qualified:

Jeffrey Lehman Pedro Cruz

FURTHER RESOLVED, that any and all actions taken to date on behalf of the Company, by any of the Managers and/or any Members are hereby ratified, approved, authorized, and consented to.

IN WITNESS WHEREOF, the undersigned execute these minutes this 20 2 day of ________, 2006.

MEMBERS:

Jeffiney Lehman

Pedro Cruz