


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 23, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L05000035877</b> 1. Entity Name B & Z REAL ESTATE CONSULTING, LLC	
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Principal Place of Business 20944 PACIFICO TERRACE BOCA RATON, FL 33433	Mailing Address 20944 PACIFICO TERRACE BOCA RATON, FL 33433
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**DO NOT WRITE IN THIS SPACE**



04172007No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-2668726	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  BEIGHLEY & MYRICK, PA 1255 W ATLANTIC BLVD. SUITE 314 POMPANO BEACH, FL 33069
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**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

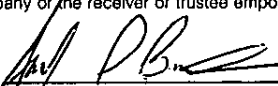
**Filing Fee is \$50.00  
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BORNSTEIN, RUSSELL 20944 PACIFICO TERRACE BOCA RATON, FL 33433
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM ZEPKA, GARY 33 CLINTON RD. WEST CALDWELL, NJ 07006
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE  
IN THIS SPACE**

U000000723987  
05/02/07-80094-003 50.00

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:**  *managing member* *4/17/07* *561 843-6240*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

*Russell S. Bornstein*