2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

Jan 31, 2007 8:00 am **Secretary of State** DOCUMENT # L05000037605 01-31-2007 90085 036 ****50.00 COCONUT PALM INDUSTRIAL PARK, LLC Mailing Address Principal Place of Business 23799 SW 167TH AVE. 23799 SW 167TH AVE. HOMESTEAD, FL 33031 HOMESTEAD, FL 33031 CR2E083 (11/05) 01192007 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Not Applicable 59-2174870 \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MARCUS, MICHAEL J DO NOT WRITE 317 N. KROME AVE. HOMESTEAD, FL 33030 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. Signature, hypertian practed name of registered agent and title 4 applicable (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2007 MANAGING MEMBERS/MANAGERS 9. MGR TITLE MUNZ, CHARLES P NAME STREET ADDRESS 23799 SW 167TH AVE. CITY-ST-ZIP HOMESTEAD, FL 33031 NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP

11. I hereby certify that the information supplied with this filling 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 eceiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

SER, OR AUTHORIZED REPRESENTATIVE

FILED