

**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Feb 26, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # L05000043668**  
 1. Entity Name  
 483 S. BEACH ROAD, LLC



Principal Place of Business 901 N. FLAGLER DRIVE WEST PALM BEACH, FL 33401 US	Mailing Address 901 N. FLAGLER DRIVE WEST PALM BEACH, FL 33401 US
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**DO NOT WRITE IN THIS SPACE**



01252007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-2803154	Applied For Not Applicable
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5. Certificate of Status Desired  **\$5.00** Additional Fee Required

**6. Name and Address of Current Registered Agent**  
 ROSECAN, LAUREN R  
 901 N. FLAGLER DRIVE  
 WEST PALM BEACH, FL 33401

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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	MM ROSECAN REALTY LTD 901 N FLAGLER DRIVE WEST PALM BEACH, FL 33401
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 03/07/07-80009-018 50.00

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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:**  **2/20/07 561-832-4411**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #