2006 LIMITED LIABILITY COMPANY

SIGNATURE:

Mar 06, 2006 8:00 am ANNUAL REPORT (AR) **Secretary of State DOCUMENT # L05000044145** 02-15-2006 90134 029 ****50.00 1. Entity Name SOUTHERN BEACH REALTY, LLC Principal Place of Business Mailing Address OUUUTION 830 GULF SHORE DRIVE SUITE 5025 DESTIN FL 32541 830 GULF SHORE DRIVE SUITE 5025 DESTIN FL 32541 2. Principal Place of Business 3. Mailing Address 507 FURINGLARE SAME Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E083 (10/05) City & State 4. FEI Number Applied For 20 - 280 5436 Not Applicable Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MCKAREM, SAMUEL S 830 GULE SHORE DRIVE 4507 FURLINGLAN Street Address (P.O. Box Number is Not Acceptable) SUITE 5025 **DESTIN FL 32541** City Zip Code 8. The above named entire submit 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: Pegishineit Agent signature required when revisibling) FILE NOW!!! FEE IS \$50.00 9 Make Check Payable to Florida Department of State Due By May 1 2006 MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. TITLE MGRM ☐ Detete TITLE ☐ Change ☐ Addition MCKAREM, SAMUEL S MALES STREET ADDRESS STREET ADDRESS 830 GULF SHORE DRIVE, SUITE 5025 CITY-ST-71P DESTIN FL 32541 CITY-ST-ZP ITILE Oelete TITLE Change ☐ Addition NAME HAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Change Delete Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TIFLE Change ncilibbA 🔲 NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DIDE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-7P CITY-ST-ZIP Defete Change ☐ Addition TITLE HILE HAME NAME STREET ADDRESS STREET ADDRESS CITY-S1-ZIP C/12-17 11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statules. 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 of rustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MARAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

30-06

Date

FILED



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 17, 2006

SOUTHERN BEACH REALTY, LLC 830 GULF SHORE DRIVE SUITE 5025 DESTIN, FL 32541

Subject: SOUTHERN BEACH REALTY, LLC

Reference Number:

L05000044145

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/rm ANNUAL REPORTS SECTION