2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000045301

City-St-Zip:

FT. LAUDERDALE, FL 33309

Entity Name: LEVINE-THOMAS, & ASSOCIATES, LLC

FILED May 01, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1245 S. POWERLINE ROAD 5767 N. ANDREWS WAY PMB-140 FT. LAUDERDALE, FL 33309 POMPANO BEACH, FL 33069 **Current Mailing Address: New Mailing Address:** 1245 S. POWERLINE ROAD 5767 N. ANDREWS WAY PMB-140 FT. LAUDERDALE, FL 33309 POMPANO BEACH, FL 33069 FEI Number: 56-2515367 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: THOMAS, DEBORA THOMAS, DEBORA 5769 N. ANDREWS WAY 5767 N. ANDREWS WAY FT. LAUDERDALE, FL 33309 US FT. LAUDERDALE, FL 33309 US 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. SIGNATURE: 05/01/2006 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGR () Delete Title: () Change () Addition THOMAS, DEBORA E Name: Name: Address: 5769 N. ANDREWS WAY Address: City-St-Zip: FT. LAUDERDALE, FL 33309 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: THOMAS, ISRAEL Name: Address: 5769 N. ANDREWS WAY Address: City-St-Zip: FT. LAUDERDALE, FL 33309 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition LEVINE, IRWIN Name: Name: 5769 N. ANDREWS WAY Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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.

City-St-Zip:

SIGNATURE: DEBORA THOMAS MGR 05/01/2006