

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000052170

Entity Name: BRI 1806 PAN AMERICAN, LLC

FILED
Mar 15, 2007
Secretary of State

Current Principal Place of Business:

664 EAST HALLANDALE BEACH BLVD.,
HALLANDALE, FL 33009 US

New Principal Place of Business:

1160 EAST HALLANDALE BEACH BLVD.,
HALLANDALE, FL 33009 US

Current Mailing Address:

664 EAST HALLANDALE BEACH BLVD.,
HALLANDALE, FL 33009 US

New Mailing Address:

1160 EAST HALLANDALE BEACH BLVD.,
HALLANDALE, FL 33009 US

FEI Number: 20-2907838

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENTATA, ARIEL J
664 EAST HALLANDALE BEACH BLVD.,
HALLANDALE, FL 33009 US

Name and Address of New Registered Agent:

BENTATA, ARIEL J
1160 EAST HALLANDALE BEACH BLVD.,
HALLANDALE, FL 33009 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: ARIEL BENTATA

03/15/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BEACON REALTY INVEST, MENTS, LLC
Address: 664 EAST HALLANDALE BEACH BLVD.,
City-St-Zip: HALLANDALE, FL 33009 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BEACON REALTY INVEST, MENTS, LLC
Address: 1160 EAST HALLANDALE BEACH BLVD.,
City-St-Zip: HALLANDALE, FL 33009 US

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.

SIGNATURE: BEACON INVESTMENT PROPERTIES LLC

MGR

03/15/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date