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## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## Apr 10, 2006 8:00 am Secretary of State DOCUMENT # L05000057337 04-10-2006 90045 006 \*\*\*\*50.00 1. Entity Name S & H FARMS, LLC Principal Place of Business Mailing Address 711 SE 5TH COURT 711 SE 5TH COURT POMPANO BEACH, FL 33060 POMPANO BEACH, FL 33060 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03242006 Chg-LLC CR2E083 (11/05) City & State City & State 4. FEI Number Applied For 20-3071883 Not Applicable Zip Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent STATHIS, SHARON Street Address (P.O. Box Number is Not Acceptable) 711 SE 5TH TERRACE POMPANO BEACH, FL 33060 City Zip Code Fl 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILED** 

Daytime Phone #

Filing Fee is \$50.00 Due by May 1, 2006 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 10. 9. MGRM TITLE Change ☐ Addition TITLE ☐ Delete STATHIS, MICHAEL NAME NAME STREET ADDRESS 711 SE 5TH TERRACE STREET ADDRESS POMPANO BEACH, FL 33060 CITY-ST-ZIP CITY-ST-ZIP MGRM Delete Addition TITLE ☐ Change TITLE NAME STATHIS, SHARON NAME STREET ADDRESS 711 SE 5TH TERRACE STREET ADDRESS POMPANO BEACH, FL 33060 CITY-ST-ZIP CITY-ST-7IP MGRM Delete TITLE ☐ Change ☐ Addition TITLE HUTCHINGS, STEVE NAME 2280 SE 7TH STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP POMPANO BEACH, FL 33060 CITY-ST-ZIP ☐ Change ■ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete ☐ Change TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

#LDS000057337

BANKUNITED, FSB 7815 NW 148 STREET MIAMI LAKES FL 33016 800-227-8119	CORRECTED  - Caution: The amount show may not be fully deductible you. Limits based on the loa amount and the cost and valid of the secured property may apply. Also, you may only deduct interest to the extent was incurred by you, actually paid by you, and not reimbursed by another person	2005	Mortgage Interest Statement
RECIPIENT'S Federal identification no. PAYER'S social st	j	from payer(s)/borrower(s)+	
<u>59-2354705</u>   203-07-18	\$ 7400.22		
S & H FARMS LLC A FLORID MICHAEL STATHIS 711 SE 5TH COURT POMPANO BEACH FL 33060  Account number (see instructions) 053-1111458	2 Points paid on purchase of \$ CORPOR 3 Refund of overpaid interest \$ 4		The information in boxes 1, 2 end 3 is important ta information and is bein furnished to the Interna Revenue Service. Il you ar required to file a return, negligence penalty or othe sanction may be imposed of you if the IRS determines tha an underpayment of tax result because you overstated deduction for this mortgag, interest or for these points o because you did not report this retund ol interest on you