2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 01, 2006
Secretary of State

DOCUMENT# L05000058699

Entity Name: 3 MIDTOWN UNIT L405, LLC

Current Principal Place of Business:

911 PHOENIX WAY
WESTON, FL 33327

New Principal Place of Business:

911 PHOENIX WAY
WESTON, FL 33327 US

Current Mailing Address:

911 PHOENIX WAY
WESTON, FL 33327

New Mailing Address:

911 PHOENIX WAY
WESTON, FL 33327 US

FEI Number: 20-2999168 **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:

CARDENAS, SAUL ANDRES
911 PHOENIX WAY
WESTON, FL 33327 US

Name and Address of New Registered Agent:

CARDENAS, SAUL A MR
911 PHOENIX WAY
WESTON, FL 33327 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: SAUL ANDRES CARDENAS 07/01/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: CEO ( ) Change (X) Addition
Name: CARDENAS, ABSALON MR
Address: 911 PHOENIX WAY
City-St-Zip: WESTON, FL 33327 US

Title: VP ( ) Change (X) Addition
Name: CARDENAS, SAUL A MR
Address: 911 PHOENIX WAY
City-St-Zip: WESTON, FL 33327 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: ABSALON CARDENAS CEO 07/01/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date