

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000059055

FILED
Apr 27, 2006
Secretary of State

Entity Name: REALTY ACQUISITION AND KAREN DECOU, LLC

Current Principal Place of Business:

40 SE 5TH STREET
SUITE 502
BOCA RATON, FL 33432

New Principal Place of Business:

102 NE 2ND ST
#351
BOCA RATON, FL 33432

Current Mailing Address:

40 SE 5TH STREET
SUITE 502
BOCA RATON, FL 33432

New Mailing Address:

102 NE 2ND ST
#351
BOCA RATON, FL 33432

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HANDFINGER, BRUCE
40 SE 5TH STREET
SUITE 502
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

HANDFINGER, BRUCE
102 NE 2ND ST
#351
BOCA RATON, FL 33432 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: BRUCE HANDFINGER

04/27/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: HANDFINGER, BRUCE
Address: 40 SE 5TH STREET, SUITE 502
City-St-Zip: BOCA RATON, FL 33432 US

Title: MGR () Delete
Name: DECOU, KAREN
Address: 21055 YACHT CLUB DRIVE
City-St-Zip: AVENTURA, FL 33180 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: HANDFINGER, BRUCE
Address: 102 NE 2ND ST #351
City-St-Zip: BOCA RATON, FL 33432 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BRUCE HANDFINGER

MGR

04/27/2006

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