2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

FILED Feb 26, 2007 08:00 AM Secretary of State

DOCU	MENI	Γ#Ι	0500	ባበብ	623 [,]	1N
レスススカ		17 L	_UUU	$\sigma \sigma \sigma$	UZU	ıv

1. Entity Name 5975 HOLDINGS, LLC



Principal Place of Business

5975 SUNSET DRIVE, STE. 601 SOUTH MIAMI, FL 33143 Mailing Address

5975 SUNSET DRIVE, STE. 601 SOUTH MIAMI, FL 33143



02222007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-3055494

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

FELDMAN, EVAN M 5975 SUNSET DRIVE, STE. 601 SOUTH MIAMI, FL 33143

NAME STREET ADDRESS

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of chains of registered agent.	anging its registered office or registered agent, or both, in the S	State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE
FI Di	iling Fee is \$50.00 ue by May 1, 2007		
9.	MANAGING MEMBERS/MANAGERS		
TITLE	MGR		
NAME	ASHLIND REALTY CORP.		
STREET ADDRESS	9121 SW 69 STREET		

CITY-ST-ZIP MIAMI, FL 33173 MGR FELDMAN, EVAN M NAME STREET ADDRESS 5975 SUNSET DRIVE, STE. 601 CITY-ST-ZIP SOUTH MIAMI, FL 33143 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CiTY-ST-ZIP TITLE

U00000648547 03/07/07-80013-016 50.00

DO NOT WRITE IN THIS SPACE

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 employeed to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER. OR AUTHORIZED REPRESENTATIVE

2/24/07-305-667-9489

Daytime Phone #