

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

5/ **FILED**
Jun 26, 2006 8:00 am
Secretary of State
05-02-2006 90042 022 ****50.00

DOCUMENT # L05000062557	
1. Entity Name DEZER QUOGUE, LLC	

Principal Place of Business 18001 COLLINS AVENUE 31ST FLOOR SUNNY ISLES BEACH, FL 33160 US	Mailing Address 18001 COLLINS AVENUE 31ST FLOOR SUNNY ISLES BEACH, FL 33160 US
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

30011254



04262006 Chg-LLC CR2E083 (11/05)

4. FEL Number 134301232	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent BRANT, BARRY M CPA 200 SOUTH BISCAYNE BLVD. 6TH FLOOR MIAMI, FL 33131		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2006**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR DEZER, NEOMI 18001 COLLINS AVENUE, 31ST FLOOR SUNNY ISLES BEACH, FL 33160 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing 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.

SIGNATURE: *Neomi Dezer* 4/26/06 2129291285x240
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #



DEZER PROPERTIES
OWNERS & DEVELOPERS

ATTACHMENT

30011254

L05000062557

April 28, 2006

Division of Corporations
2670 Executive Center Circle
Suite 100
Tallahassee, Florida 32301

To Whom It May Concern:

Enclosed within please find the 2006 Limited Liability Company Annual Report including the filing fee's.

Should you have any questions please do not hesitate to call.

Sincerely,

Leslie Dezer
212-929-1285 x 249