


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 13, 2007 08:00 AM
Secretary of State

| | |
|--|---|
| DOCUMENT # L05000068592 1. Entity Name 505, LLC |  |
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| Principal Place of Business 1104 NORTHWEST 1ST STREET FORT LAUDERDALE, FL 33 US | Mailing Address 1104 NORTHWEST 1ST STREET FORT LAUDERDALE, FL 33311 US |
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04052007 No Chg-LLC

CR2E083 (11/05)

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| 4. FEI Number 20-3135597 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

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|---|
| 6. Name and Address of Current Registered Agent SAUTTER, C. CHRISTIAN ESQ. 2850 NORTH ANDREWS AVENUE FORT LAUDERDALE, FL 33311 |
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IN THIS SPACE**

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) DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

| 9. MANAGING MEMBERS/MANAGERS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGRM ELWELL, EDWIN C 1104 NORTHWEST 1ST STREET FORT LAUDERDALE, FL 33311 |
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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:  EDWIN C. ELWELL 4/5/07 954 463 2563

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

Date

Daytime Phone #