

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000074297

FILED
Jan 20, 2006
Secretary of State

Entity Name: THE BAE COMPANY, L.C.

Current Principal Place of Business:

2000 TOWERSIDE TERRACE
UNIT 601
MIAMI SHORES, FL 33138

New Principal Place of Business:

Current Mailing Address:

2000 TOWERSIDE TERRACE
UNIT 601
MIAMI SHORES, FL 33138

New Mailing Address:

FEI Number: 20-3216595

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDWARDS, CARLADENISE A
2000 TOWERSIDE TERRACE
UNIT 601
MIAMI SHORES, FL 33138 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: EDWARDS, CARLADENISE A
Address: 2000 TOWERSIDE TERRACE, UNIT 601
City-St-Zip: MIAMI SHORES, FL 33138

Title: MGRM () Delete
Name: ARMBRISTER, ANTHONY P
Address: 17774 SW 12TH STREET
City-St-Zip: PEMBROKE PINES, FL 33029

Title: MGRM () Delete
Name: EDWARDS, HERMAN A
Address: 2000 TOWERSIDE TERRACE, UNIT 601
City-St-Zip: MIAMI SHORES, FL 33138

ADDITIONS/CHANGES:

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

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

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: ANTHONY P. ARMBRISTER

MGRM

01/20/2006

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