

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 26, 2006 8:00 am
Secretary of State

06-26-2006 90272 006 ****50.00

DOCUMENT # L05000079358
 1. Entity Name
 1705 NW 15TH STREET, LLC



Principal Place of Business Mailing Address
 2014 SOUTH ANDREWS AVENUE 2014 SOUTH ANDREWS AVENUE
 FT. LAUDERDALE, FL 33315 FT. LAUDERDALE, FL 33315



2. Principal Place of Business		3. Mailing Address		05112006 Chg-LLC CR2E083 (11/05)	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
Zip	Country	Zip	Country		

6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CHRISTOPHER D. NILES, PA 3012 E. COMMERCIAL BLVD SUITE 200 FT. LAUDERDALE, FL 33308			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			State Zip Code		
			FL		

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 September 6, 2006 **Make check payable to Florida Department of State**

9. MANAGING MEMBERS/MANAGERS				10. ADDITIONS/CHANGES			
TITLE	MGRM	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	KARNEY, ILENE B			NAME			
STREET ADDRESS	2014 SOUTH ANDREWS AVENUE			STREET ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE, FL 33315			CITY-ST-ZIP			
TITLE	MGRM	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	KARNEY, DONALD R SR.			NAME			
STREET ADDRESS	2014 SOUTH ANDREWS AVENUE			STREET ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE, FL 33315			CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			

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: DONALD R KARNEY, SR *Donald R Karney, Sr* Date Daytime Phone #

954-523-1432
6/22/06