


FILED
May 04, 2007 8:00 am
Secretary of State

05-04-2007 90309 042 ****50.00

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L05000096056			
1. Entity Name P.H. PARTNERS, L.L.C.			
Principal Place of Business 929 CLINT MOORE ROAD BOCA RATON, FL 33487		Mailing Address 929 CLINT MOORE ROAD BOCA RATON, FL 33487	
2. Principal Place of Business - No P.O. Box # 999 Yamato Road		3. Mailing Address 999 Yamato Road	
Suite, Apt. #, etc. Third Floor		Suite, Apt. #, etc. Third Floor	
City & State Boca Raton, FL		City & State Boca Raton, FL	
Zip 33431	Country USA	Zip 33431	Country USA
6. Name and Address of Current Registered Agent HELLER, LAWRENCE R ON BRIDGE, HELLER & BROWN, PA. 2 SOUTH BISCAYNE BLVD., SUITE 1570 MIAMI, FL 33131		4. FEI Number 20-3889323 5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
7. Name and Address of New Registered Agent Name Howard Koslow Street Address (P.O. Box Number is Not Acceptable) 999 Yamato Road, Third Floor City Boca Raton FL Zip Code 33431		Applied For Not Applicable	
B. 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 <u>Howard Koslow</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>		DATE <u>4/24/07</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>	
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BARONOFF, PETER 929 CLINT MOORE ROAD BOCA RATON, FL 33487 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM Baronoff, Peter 999 Yamato Road, Third Floor Boca Raton, FL 33431 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM KOSLOW, HOWARD 929 CLINT MOORE ROAD BOCA RATON, FL 33487 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM Koslow, Howard 999 Yamato Road, Third Floor Boca Raton, FL 33431 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: <u>Howard Koslow</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>		Date <u>4/24/07</u> Daytime Phone # <u>561-869-3100</u>	

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