

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000097482

Entity Name: INVERNESS PLAZA, LLC

FILED
Jan 30, 2006
Secretary of State

Current Principal Place of Business:

9580 BAY HARBOR TERRACE
BAY HARBOR ISLANDS, FL 33154

New Principal Place of Business:

9550 BAY HARBOR TERRACE
SUITE 209
BAY HARBOR ISLANDS, FL 33154

Current Mailing Address:

9580 BAY HARBOR TERRACE
BAY HARBOR ISLANDS, FL 33154

New Mailing Address:

9550 BAY HARBOR TERRACE
SUITE 209
BAY HARBOR ISLANDS, FL 33154

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERELIS, ALLAN
9580 BAY HARBOR TERRACE
BAY HARBOR ISLANDS, FL 33154 US

Name and Address of New Registered Agent:

PERELIS, ALLAN
9550 BAY HARBOR TERRACE
SUITE 209
BAY HARBOR ISLANDS, FL 33154 US

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: ALLAN PERELIS

01/30/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BETESH, ISAAC
Address: 425 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10017 US

Title: MGRM () Delete
Name: ISRAELI, MORDECHAI
Address: 425 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10017 US

ADDITIONS/CHANGES:

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: ISAAC BETESH

MGR

01/30/2006

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