2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000098119

Entity Name: SOBEL-JAX, LLC

Name:

Address:

City-St-Zip:

SOBEL, JEFFREY E

SOUTHFIELD, MI 48034

26400 W 12 MILE RD SUITE 50

FILED Jul 13, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 17939 LAKE ESTATE DR 600 CORPORATE DRIVE BOCA RATON, FL 33496 SUITE 100 FORT LAUDERDALE, FL 33334 **Current Mailing Address: New Mailing Address:** 26400 WEST TWELVE MILE ROAD 17939 LAKE ESTATE DR BOCA RATON, FL 33496 SUITE 50 SOUTHFIELD, MI 48034 FEI Number: 20-3474578 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SOBEL, SAMUEL R 17939 LAKE ESTATE DR BOCA RATON, FL 33496 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete SOBEL, SAMUEL R Name: Name: Address: 17939 LAKE ESTATE DR Address: City-St-Zip: BOCA RATON, FL 33496 City-St-Zip: Title: MGRM () Delete 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: SAMUEL R. SOBEL MGRM 07/13/2006