

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000098200

Entity Name: THREE WIVES, LLC

FILED
Apr 30, 2006
Secretary of State

Current Principal Place of Business:

7955 MANDARIN DRIVE
BOCA RATON, FL 33433 US

New Principal Place of Business:

Current Mailing Address:

7955 MANDARIN DRIVE
BOCA RATON, FL 33433 US

New Mailing Address:

FEI Number: 20-3630165

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

GINBERG, LESLIE
7955 MANDARIN DRIVE
BOCA RATON, FL 33433 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: LESLIE GINBERG

04/30/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GINBERG, LESLIE
Address: 7955 MANDARIN DRIVE
City-St-Zip: BOCA RATON, FL 33433 US

Title: MGRM () Delete
Name: LEEDS, MEREDITH
Address: 5855 PADDINGTON WAY
City-St-Zip: BOCA RATON, FL 33496 US

Title: MGRM () Delete
Name: BOCK, KARA
Address: 3218 WESTMINSTER DRIVE
City-St-Zip: BOCA RATON, FL 33496 US

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: LESLIE GINBERG

MGRM

04/30/2006

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