## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

Mar 19, 2007 08:00 AN **DOCUMENT # L05000098248 Secretary of State** 1. Entity Name 606 N. BAY ROAD, LLC Principal Place of Business Mailing Address 9511 COLLINS AVENUE, #1502 9511 COLLINS AVENUE, #1502 SURFSIDE, FL 33154 SURFSIDE, FL 33154 03082007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-3887367 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SINGER, BERNARD A ESQ DO NOT WRITE 3107 STIRLING ROAD, SUITE 105 FT. LAUDERDALE, FL 33312 IN THIS SPACE 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 reinstaling) DATE Filing Fee is \$50.00 Due by May 1, 2007 MANAGING MEMBERS/MANAGERS 9. TITLE NAME ASSAYAG, VITORIA 9511 COLLINS AVENUE, #1502 STREET ADDRESS SURFSIDE, FL 33154 CITY-ST-ZIP TITLE NAME STREET ADDRESS 90000U670U41 CITY-ST-ZIP 03/27/07-80096-014 50.00 TITLE NAME STREET ACORESS DO NOT WRITE CITY-ST-ZIP IIILE IN THIS SPACE MAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 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 cath; that I am a managing member or manager of the limited liability company or the receiver or pustee empowered to execute this report as required by Chapter 608, Florida Statutes.

VHOCIA REGINA ASSAYA

Haraa

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME

**FILED**