

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000100158

Entity Name: 2937 FERRARI, LLC

FILED
Jan 27, 2006
Secretary of State

Current Principal Place of Business:

28 W FLAGLER ST SUITE 500
MIAMI, FL 331301891

New Principal Place of Business:

2915 BISCAYNE BLVD
200
MIAMI, FL 33137

Current Mailing Address:

28 W FLAGLER ST SUITE 500
MIAMI, FL 331301891

New Mailing Address:

2915 BISCAYNE BLVD.
200
MIAMI, FL 33137

FEI Number: 20-4192351

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROGERS, HARVEY D
28 W FLAGLER ST SUITE 500
MIAMI, FL 331301891 US

Name and Address of New Registered Agent:

KAUFMAN, DANA M CPA
4000 HOLLYWOOD BLVD
215-S
HOLLYWOOD, FL 33021 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: DANA M KAUFMAN

01/27/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BARROUKH, YVES R
Address: 28 W FLAGLER ST SUITE 500
City-St-Zip: MIAMI, FL 331301891

Title: MGR () Delete
Name: KARP, KOBI
Address: 28 W FLAGLER ST SUITE 500
City-St-Zip: MIAMI, FL 331301891

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: KARP, NANCY
Address: 2915 BISCAYNE BLVD, SUITE 200
City-St-Zip: MIAMI, FL 33137

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: NANCY KARP

MGRM

01/27/2006

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