2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2007
Secretary of State

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Entity Name: EL-AD TUSCANY POINTE LLC

Current Principal Place of Business:

7975 NW 154TH STREET, SUITE 200
MIAMI LAKES, FL 33016 US

New Principal Place of Business:

1301 INTERNATIONAL PKWY; STE 200
SUNRISE, FL 33323 US

Current Mailing Address:

7975 NW 154TH STREET, SUITE 200
MIAMI LAKES, FL 33016 US

New Mailing Address:

1301 INTERNATIONAL PKWY; STE 200
SUNRISE, FL 33323 US

FEI Number: 20-3753808 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, STE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

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:

Title: MGR ( ) Delete
Name: HACKMON, ORLY
Address: 575 MADISON AVENUE, 22ND FLOOR
City-St-Zip: NEW YORK, NY 10022 US

Title: P ( ) Delete
Name: MISHAL, SHAOUL
Address: 7975 NW 154TH STREET, SUITE 200
City-St-Zip: MIAMI LAKES, FL 33016 US

Title: CFO (X) Delete
Name: MANOR, JOSEPH
Address: 7975 NW 154TH STREET, SUITE 200
City-St-Zip: MIAMI LAKES, FL 33016 US

Title: VP (X) Delete
Name: COHEN, LIOR
Address: 7975 NW 154TH STREET, SUITE 200
City-St-Zip: MIAMI LAKES, FL 33016 US

Title: S (X) Delete
Name: ARBIT, SHEARA
Address: 575 MADISON AVENUE, 22ND FLOOR
City-St-Zip: NEW YORK, NY 10022 US

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: DANIELL, ORLY
Address: 575 MADISON AVENUE, 22ND FLOOR
City-St-Zip: NEW YORK, NY 10022 US

Title: P (X) Change ( ) Addition
Name: MISHAL, SHAOUL
Address: 1301 INTERNATIONAL PKWY; STE 200
City-St-Zip: SUNRISE, FL 33323

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 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: SHAOUL MISHAL P 04/29/2007

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