## 2006 LIMITED LIABILITY COMPANY

SIGNATURE:

## May 05, 2006 8:00 am Secretary of State ANNUAL REPORT **DOCUMENT # L05000109176** 05-05-2006 90034 011 \*\*\*\*50.00 1. Entity Name 250 ABERDEEN LLC Mailing Address Principal Place of Business 5601 NORTH DIXIE HIGHWAY, SUITE 307 5601 NORTH DIXIE HIGHWAY, SUITE 307 FORT LAUDERDALE, FL 33334 FORT LAUDERDALE, FL 33334 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04262006 Chg-LLC CR2E083 (11/05) City & State 4. FEI Number Applied For City & State 20-384*77* Not Applicable Country Zip Country Zip \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name POWERS, DAVID J P.A. Street Address (P.O. Box Number is Not Acceptable) 7777 GLADES ROAD, SUITE 300 BOCA RATON, FL 33434 City Zip Code 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 reinstating) DATE Make check payable to: Filing Fee is \$50.00 Due by May 1, 2006 Florida Department of State ADDITIONS/CHANGES MANAGING MEMBERS/MANAGERS 10. 9. MGR TITLE Change Addition IIILE ☐ Delete TANEY, BARRY NAME NAME 5601 NORTH DIXIE HIGHWAY SUITE 307 STREET ADDRESS STREET ADDRESS FORT LAUDERDALE, FL 33334 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change TITLE HALPERIN, LARRY NAME NAME 5601 NORTH DIXIE HIGHWAY, SUITE 307 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY+ ST- 712 FORT LAUDERDALE, FL 33334 ☐ Delete TITLE ANAGNOSTE, SCOTT R. NAME 5601 NORTH DIXIE HIGHWAY SUITE 307 STREET ADDRESS STREET ADDRESS FORT LAUDERDALE, FL 3333 CITY-ST-ZIP CITY-ST-7IP ☐ Change Addition ☐ Delete TITLE THOMPSON, W. SCOTT 5601 NORTH DIXIE HIGHWAY, SUITE 307 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE, FL 33334 CITY-ST-ZIP TITLE Delete TILE RUBSAMEN, PATRICK 5601 NORTH DINE HIGHWAY, SUITE 307 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF FORT LAUDER DALE FL 33334 ☐ Change ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 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. 5-2-06

ER, OR AUTHORIZED REPRESENTATIVE

NG MEM

Daytme Phone #