2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000025790

Entity Name: 1400 OAKLAND OFFICE CENTER, LLC

FILED Jan 22, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2101 N. ANDREWS AVE., SUITE 403 1400 EAST OAKLAND PARK BOULEVARD WILTON MANORS, FL 33311

SUITE 111

OAKLAND PARK, FL 33334

Current Mailing Address: New Mailing Address:

2101 N. ANDREWS AVE., SUITE 403 1400 EAST OAKLAND PARK BOULEVARD

WILTON MANORS, FL 33311 SUITE 111

OAKLAND PARK, FL 33334

FEI Number: 20-4556835 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROSEN, EVE W ROSEN, EVE W 2101 N. ANDREWS AVE., SUITE 403 1400 EAST OAKLAND PARK BOULEVARD

WILTON MANORS, FL 33311 SUITE 202 OAKLAND PARK, FL 33334 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: 01/22/2008

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: (X) Change () Addition () Delete

BEESON, JAMES M JR. KOPLOWITZ, DAVID Name: Name: Address: 2101 N. ANDREWS AVE., SUITE 403 Address: 1400 EAST OAKLAND PARK BLVD STE 111

City-St-Zip: WILTON MANORS, FL 33311 City-St-Zip: OAKLAND PARK, FL 33334

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: DAVID KOPLOWITZ 01/22/2008