



**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Mar 07, 2008 08:00 A**  
**Secretary of State**

<b>DOCUMENT # L06000107055</b> 1. Entity Name 26 NE 54 ST, LLC	
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Principal Place of Business 780 NORTHEAST 69TH STREET #T9 MIAMI, FL 33138	Mailing Address 780 NORTHEAST 69TH STREET #T9 MIAMI, FL 33138
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DO NOT WRITE IN THIS SPACE

	
01142008No Chg-LLC	CR2E083 (12/07)
4. FEI Number 30-0391455	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

TEREM, GIL  
 780 NORTHEAST 69TH STREET  
 #T9  
 MIAMI, FL 33138

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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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

000000851138  
 03/25/08-80027-007 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TEREM, GIL 780 NORTHEAST 69TH STREET, #T9 MIAMI, FL 33138
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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.

SIGNATURE:  DATE: 3/5/08 DAYTIME PHONE # \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE