2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED May 01, 2007 8:00 am Secretary of State 05-01-2007 90324 013 ****55.00

1. Entity Name BLTC2 GP, LLC											
Principal Place of Business 321 EAST HILLSBORO BLVD. DEERFIELD BEACH, FL 33441		Mailing Address 321 EAST HILLSBORO BLVD. DEERFIELD BEACH, FL 33441									
2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address									
Suite, Apt. #, etc.		Suite, Apt. #, etc.				01302007	Chg-	LLC	CR2E	83 (12/06)	
City & State		City & State				4. FEI Numb 20-5927					pplied For ot Applicable
Zip	Country Zip Cou		Countr	ry .		5. Certificat	e of Status	Desired	XXX	\$5.00 Ad Fee Require	
8. Name and Address of Current Registered Agent				Name		7. Name an	d Address	of New R	egistered .	Agent	
321 EAST	, THEODORE R HILLSBORO BLVD D BEACH, FL 33441	Street Addr			lress (f	ss (P.O. Box Number is Not Acceptable)					
	- 3 - 2		,	City				-	FL	Zip Cod	le
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 an	d title if applicable. (NOTE: R	egistered	Agent signature	required	when reinstating)		·	DATE		 إ
Filing Fee is \$50.00 Due by May 1, 2007									e check p Departm	ayable to ent of \$tat	e
9.	MANAGING MEMBER	S/MANAGERS	10.				AC	DITIONS	/CHANGES	i	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	NAME STREET CITY-S	1 ADDRESS 3	321 I	n Miami L East Hill Field Bea	sboro l	Blvd.		☐ Change	XXXAddition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	NAME STREET	T ADDRESS						☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Defete	TITLE NAME STREET CITY-S	1 ADDRESS ST-ZIP						☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET CITY-S	T ADDRESS ST-ZIP						☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET CITY-S	T ADDRESS ST-ZIP						Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	NAME STREET CITY-S	f address St-zip						☐ Change	Addition
indicated	ertify that the information supplied with to on this report is true and accurate and the bility company or the receiver or trustee BLTC2 GP LLC	nat my signature shall have the	same	legal effect :	as if m	ade under oat	h: that I ar				

BY: NORTH MIAMI LAND HOLDINGS, INC., its managing member

SIGNATURE: By:

SIGNATURE AND TYPER OF PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE
THEOGOGY R. STOLZET, VICE President

March 8, 2007

(954) 949-3480

Dayume Phone #