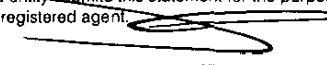
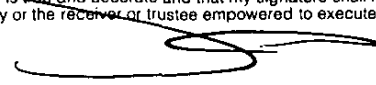


# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jan 23, 2008 8:00 am**  
**Secretary of State**

01-23-2008 90023 017 \*\*\*138.75

<b>DOCUMENT # L07000057085</b> 1. Entity Name <b>PURDY PARTNERS 1929, LLC</b>					
Principal Place of Business <b>230 FIFTH STREET</b> <b>MIAMI BEACH, FL 33139 US</b>			Mailing Address <b>230 FIFTH STREET</b> <b>MIAMI BEACH, FL 33139 US</b>		
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.  City & State  Zip      Country		3. Mailing Address  Suite, Apt. #, etc.  City & State  Zip      Country		<div style="text-align: center;">  </div> <div style="margin-top: 10px;"> <b>01142008    Chg-LLC    CR2E083 (12/06)</b> </div> <div style="margin-top: 10px;">         4. FEI Number  <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>26-0258148</b> </div> <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-left: 10px;">             Applied For Not Applicable           </div> </div> <div style="margin-top: 10px;">         5. Certificate of Status Desired    <input type="checkbox"/>    <b>\$5.00</b> Additional Fee Required       </div>	
6. Name and Address of Current Registered Agent  <b>RATNER &amp; TOBIN, LLP</b> <b>1800 SUNSET HARBOUR DRIVE</b> <b>MARINA SUITE #2</b> <b>MIAMI BEACH, FL 33139</b>				7. Name and Address of New Registered Agent Name <b>Scott Robins</b> Street Address (P.O. Box Number is Not Acceptable) <b>C/O SRC Properties, LLC</b> <b>Miami Beach 230 5th St</b> City <b>Miami Beach</b> <b>FL</b> Zip Code <b>33139</b>	
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  <small>Signature, typed or printed name of registered agent and title if applicable.</small>		<b>Scott Robins</b> <b>1/14/08</b> <small>(NOTE: Registered Agent signature required when reinstating)</small> <small>DATE</small>			
<b>FILE NOW!!! FEE IS \$138.75</b> <b>After May 1, 2008 Fee will be \$538.75</b>		<b>Make check payable to</b> <b>Florida Department of State</b>			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR PURDY PARTNERS 1929 SRC, LLC 230 FIFTH STREET MIAMI BEACH, FL 33139	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR PURDY PARTNERS 1929 PL, LLC 866 SOUTH DIXIE HIGHWAY CORAL GABLES, FL 33146	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: 		<b>Scott Robins</b> <b>1/14/08</b> <b>3056740600</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small> <small>Date</small> <small>Daytime Phone #</small>			