


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 06, 2006 08:00 AM
Secretary of State

DOCUMENT # L96000000503
1. Entity Name
WASHINGTON AVENUE, L.C.



Principal Place of Business 1317 WASHINGTON AVE. MIAMI BEACH, FL 33139	Mailing Address 1317 WASHINGTON AVE. MIAMI BEACH, FL 33139
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02152008 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0741944	Applied For Not Applicable
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5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
SHEMTOV, SAMI
3640 YACHT CLUB DRIVE, APT. 2005
AVENTURA, FL 33180

**DO NOT WRITE
IN THIS SPACE**

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)

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEM SHEMTOV, SAMI 3448 LAUREL OAK LN. HOLLYWOOD, FL 33021
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEM SHACHAF, YITZIK 761 3 AVE. BROOKLYN, NY
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEM SHEMTOV, EZRA 8104 AVE. L BROOKLYN, NY 11236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEM WEISS, MIKE 8208 AVE. M BROOKLYN, NY 11236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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03/17/06-80041-017 150.00

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IN THIS SPACE**

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:  3-3-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE DATE Daytime Phone #