

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L96000000905

Entity Name: SPIN-FLA2, L.C.

FILED
Apr 27, 2006
Secretary of State

Current Principal Place of Business:

4474 WESTON RD SUITE 157
DAVIE, FL 33331

New Principal Place of Business:

4474 WESTON RD.
SUITE 157
FORT LAUDERDALE, FL 33331

Current Mailing Address:

4474 WESTON RD SUITE 157
DAVIE, FL 33331

New Mailing Address:

4474 WESTON RD
SUITE 157
FORT LAUDERDALE, FL 33331

FEI Number: 65-0744115

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NADLER, DANIEL M
1112 WESTON ROAD, PMB 175
FORT LAUDERDALE, FL 33326 US

Name and Address of New Registered Agent:

NADLER, DANIEL M MGRM
4474 WESTON RD
SUITE 157
FORT LAUDERDALE, FL 33331 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: DANIEL M. NADLER

04/27/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: NADLER, DANIEL M
Address: 4474 WESTON RD SUITE 157
City-St-Zip: DAVIE, FL 33331

Title: MGRM () Delete
Name: HUGHES, ROBERT K
Address: 2348 BRUNER LANE SE
City-St-Zip: FORT MYERS, FL 33912

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: NADLER, DANIEL M
Address: 4474 WESTON RD SUITE 157
City-St-Zip: FORT LAUDERDALE, FL 33331

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: DANIEL M. NADLER

MGRM

04/27/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date