S07127902725
04/26/07 90029 043
$50.00

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # L96000001101

2007 JUN 15 PM 1:18

1. Entity Name
35 NW 54TH ST, L.C.

30010527

Principal Place of Business	Mailing Address
419 WEST 49TH STREET #106 HIALEAH, FL 33012-3602	419 WEST 49TH STREET #106 HIALEAH, FL 33012-3602

03192007 Chg-LLC CR2E083 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
419 WEST 49TH ST.	419 WEST 49TH ST.
Suite, Apt. #, etc. # 105	Suite, Apt. #, etc. # 105
City & State HIALEAH, FL.	City & State HIALEAH, FL.
Zip / Country 33012 / U.S.A.	Zip / County 33012 / U.S.A.

4. FEI Number
65-0704447
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
7800 NE 2ND AVE, L.C. 419 WEST 49TH STREET #106 HIALEAH, FL 33012-3602	Name: REAL PROPERTY CARE, INC Street Address (P.O. Box Number is Not Acceptable): 419 W 49TH ST. #105 City: HIALEAH FL Zip Code: 330

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] MGR 4/9/07
Signature, type or print name of registered agent, and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by May 1, 2007

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR FISHER, RONALD P 1801 CENTURY PARK EAST #2400 LOS ANGELES, CA 900672326	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR FISHER, RONALD P. 419 W 49TH ST. #105 HIALEAH, FL. 33012	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR FISHER, JAMES Q 1801 CENTURY PARK EAST #2400 LOS ANGELES, CA 900672326	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR FISHER, JAMES Q. 419 W 49TH ST. #105 HIALEAH, FL. 33012	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR FISHER, RICHARD J 1801 CENTURY PARK EAST #2400 LOS ANGELES, CA 900672326	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR FISHER, RICHARD J. 419 W 49TH ST. #105 HIALEAH, FL. 33012	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ 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: [signature] 4/9/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #