2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

Secretary of State **DOCUMENT # L98000000884** 02-26-2007 90308 004 ****50.00 1. Entity Name JK RÉALTY, LLC Principal Place of Business Mailing Address 3100 NORTH 29TH AVENUE 3100 NORTH 29TH AVENUE 20005297 HOLLYWOOD, FL 33020 HOLLYWOOD, FL 33020 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02212007 Cha-LLC CR2E083 (12/06) 4. FEI Number City & State City & State Applied For 65-0849614 Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ALTMAN STEVEN ALTMAN, STEVEN Street Address (P.O. Box Number is Not Acceptable) 3370 NE 190TH ST #2411 AVENTURA, FL 33180 HOLLY WOOD 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. 4 (tma~ Filing Fee is \$50.00 Due by May 1, 2007 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. MGRM TITEF ☐ Delete TITLE MGRM Change ☐ Addition ALTMAN, STEVEN ALTMAN, STEVEN NAME NAME 3100 N. Z9 H AVE. STREET ADDRESS 3370 NE 190TH ST #2411 STREET ADDRESS AVENTURA, FL 33180 CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD, FL MGRM Change TITLE ☐ Delete TITLE ☐ Addition MGRM NAME GREENBERG, JODEE NAME GREENBERG JODEE 3100 N. Z9TH AUE STREET ADDRESS 3370 NE 190TH ST #2411 STREET ADDRESS AVENTURA, FL 33180 CITY-ST-ZIP CITY-ST-7IP 33020 HOLLY WOOD TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE ☐ Delete TITLE TITLE Channe ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IE CITY-ST-ZIP 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.

FILED Feb 26, 2007 8:00 am