

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 23, 2006 8:00 am
Secretary of State

01-23-2006 90137 042 ****55.00

20001809



DOCUMENT # L99000001197 1. Entity Name FIFTH AVENUE PLACE, LLC					
Principal Place of Business 400 SE FIFTH AVENUE STE 604 BOCA RATON, FL 33432			Mailing Address 400 SE FIFTH AVENUE STE 604 BOCA RATON, FL 33432		
2. Principal Place of Business 55 NE FIFTH AVE Suite, Apt. #, etc. SUITE 402 City & State BOCA RATON, FL Zip 33432		3. Mailing Address 55 NE FIFTH AVE Suite, Apt. #, etc. SUITE 402 City & State BOCA RATON, FL Zip 33432		01102006 Chg-LLC CR2E083 (11/05)	
Country USA		Country USA		4. FEI Number 65-0903164	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent HADDAD, CALVIN 400 S E FIFTH AVENUE STE 604 BOCA RATON, FL 33432			7. Name and Address of New Registered Agent Name HADDAD, CALVIN Street Address (P.O. Box Number is Not Acceptable) 55 NE FIFTH AVE SUITE 402 City BOCA RATON FL Zip Code 33432		
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>		(CALVIN HADDAD)		1/19/06 <small>DATE</small>	
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM B & C BOCA HOLDINGS LTD 400 S E FIFTH AVENUE STE 604 BOCA RATON, FL 33432		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM B+C BOCA HOLDINGS LTD 55 NE FIFTH AVE - SUITE 402 BOCA RATON, FL 33432	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" 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:			(CALVIN HADDAD)		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date 1/19/06 Daytime Phone # (212) 683-4444		

ATTACHMENT

20001809

Fifth Avenue Place, LLC

55 N.E. Fifth Ave., Suite 402
Boca Raton, FL 33432
561-361-7256 (Tel) - 561-392-3693 (Fax)

January 18, 2006

Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: *Fifth Avenue Place, LLC*
Document #L99000001197

Dear Sir or Madam:

Enclosed please find our check #2390 in the amount of \$55.00 paying the **Annual Report** for 2006 for the above-referenced document number.

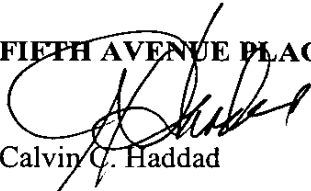
Included in our payment is \$5.00 as the additional fee required for you to forward a **Certificate of Status Desired** (No. 5).

Please be kind enough to forward said Certificate to the new mailing address as indicated within box #7 of the **Annual Report**, as follows:

Fifth Avenue Place, LLC
C/o Calvin C. Haddad
55 N.E. Fifth Ave., Suite 402
Boca Raton, FL 33432

Very truly yours,

FIFTH AVENUE PLACE, LLC


Calvin C. Haddad

CCH/cp
Encl.