2005 LIMITED LIABILITY OMPANY ANNUAL REPORT

FILED Jan 18, 2005 08:00 AM Secretary of State **DOCUMENT # L99000001748** 2840 PROPERTIES, L.L.C. Principal Place of Business Mailing Address 2840 NW 2ND AVE 211 PINE TERRACE WEST PALM BEACH, FL 33405 SUITE 204 BOCA RATON, FL 33487 01112005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number NOT APPLICABLE Applied For Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HERTZBERG, JENNIFER N DO NOT WRITE 211 PINE TERRACE WEST PALM BEACH, FL 33405 IN THIS SPACE changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept 8. The above named entity submits this statement for the purpose the obligations of registered n and tite if applic red Agent signature required when roussating) DATE Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. TITIF MGR HERTZBERG, MICHAEL NAME STREET ADDRESS 211 PINE TERRACE U00000182162 01/19/05-80016-010 55.00 CITY-ST-ZIP WEST PALM BEACH, FL 33405 TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TIFI F NAME

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 fiability company or the receiver or trusting empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Dayrime Phone #