
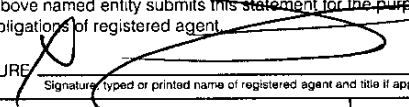
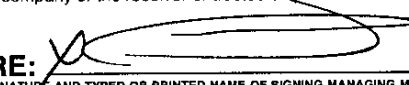


2005-LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 16, 2005 8:00 am
Secretary of State

08-16-2005 90013 034 ****50.00

DOCUMENT # L99000002905 1. Entity Name LINCOLN PLAZA PARTNERS LLC					
Principal Place of Business 230 5TH STREET, 2ND FLOOR MIAMI BEACH, FL 33139			Mailing Address 230 5TH STREET, 2ND FLOOR MIAMI BEACH, FL 33139		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip Country		Zip Country		4. FEI Number 65-0954974	
5. Certificate of Status Desired <input type="checkbox"/>				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent INTRASTATE REGISTERED AGENT CORPORATION 701 BRICKELL AVE., SUITE 3000 MIAMI, FL 33131			7. Name and Address of New Registered Agent Name SRC Properties, LLC Street Address (P.O. Box Number is Not Acceptable) 230 5th Street City Miami Beach FL Zip Code 33139		
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>			DATE 8/11/05 <small>(NOTE: Registered Agent signature required when reinstating)</small>		
Filing Fee is \$50.00 Due by September 7, 2005			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SRC LINCOLN PLAZA LLC C/O 230 5TH STREET, 2ND FLOOR MAIMI, FL 33139	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Scott Robins 230 5th Street Miami Beach, FL 33139	<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		
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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 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 liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>			DATE 8/11/05 TIME 305-674-0600 <small>Daytime Phone #</small>		

14019167



08112005 Chg-LLC CR2E083 (10/03)

Applied For
Not Applicable

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

7. Name and Address of New Registered Agent

Name **SRC Properties, LLC**

Street Address (P.O. Box Number is Not Acceptable)

230 5th Street

City **Miami Beach** FL Zip Code **33139**

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CITY-ST-ZIP

MGR
SRC LINCOLN PLAZA LLC
C/O 230 5TH STREET, 2ND FLOOR
MAIMI, FL 33139

☐ Delete

TITLE
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CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

President
Scott Robins
230 5th Street
Miami Beach, FL 33139

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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SIGNATURE: 
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DATE **8/11/05** TIME **305-674-0600**
Daytime Phone #