

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000003498

FILED
Jun 19, 2006
Secretary of State

Entity Name: HOSTOF, L.L.C.

Current Principal Place of Business:

2565 EMERLAD WAY N
DEERFIELD BEACH, FL 33442

New Principal Place of Business:

2648 EMERLAD WAY N
DEERFIELD BEACH, FL 33442

Current Mailing Address:

2565 EMERLAD WAY N
DEERFIELD BEACH, FL 33442

New Mailing Address:

P O BOX 5087
DEERFIELD BEACH, FL 33442

FEI Number: 65-0932645 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

DONALDSON, KAREN
2565 EMERLAD WAY N
DEERFIELD BEACH, FL 33442 US

Name and Address of New Registered Agent:

DONALDSON, KAREN
2880 NE 14 ST CAUSEWAY
404
POMPANO BEACH, FL 33062 US

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.

SIGNATURE: KAREN DONALDSON

06/19/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DONALDSON, KAREN
Address: 2565 EMERLAD WAY N
City-St-Zip: DEERFIELD BEACH, FL 33442

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DONALDSON, KAREN
Address: 2880 NE 14 ST CAUSEWAY #404
City-St-Zip: POMPANO BEACH, FL 33062 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: KAREN DONALDSON

MGRM

06/19/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date