2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L99000005411

 Entity Name CANTON CENTER ASSOCIATES, L.L.C.

Principal Place of Business

Mailing Address

1428 BRICKELL AVE., EIGHTH FL MIAMI, FL 33131 8854 S.W. 129TH TERRACE MIAMI, FL 33176

FILED Apr 25, 2007 8:00 am Secretary of State

04-25-2007 90131 001 ***100.00

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01042007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 11-2886114 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MANASTER, JOSHUA D 1428 BRICKELL AVE., EIGHTH FL MIAMI, FL 33131

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

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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_	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered	Agent signature required when reinstating)	DATE	
Fi	ling Fee is \$50.00 ue by May 1, 2007				,
9.	MANAGING MEMBERS/MANAGERS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M 56TH ASSOCIATES, L.L.C. 1428 BRICKELL AVE., EIGHTH FL MIAMI, FL 33131				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT	WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS	SPACE	
TITLE NAME STREET ADDRESS 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.

SIGNATURE:

Date

Daytime Phone #