

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000006658

Entity Name: FALCON DIVERSIFIED, LLC

FILED
Apr 28, 2005
Secretary of State

Current Principal Place of Business:

201 SOUTH BISCAYNE BLVD., STE 1700
MIAMI, FL 33131

New Principal Place of Business:

5255 NW 159TH STREET
MIAMI, FL 33014

Current Mailing Address:

201 SOUTH BISCAYNE BLVD., STE 1700
MIAMI, FL 33131

New Mailing Address:

5255 NW 159TH STREET
MIAMI, FL 33014

FEI Number: 65-0954885

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIAMI CENTER REGISTERED AGENTS, INC.
201 SOUTH BISCAYNE BLVD, STE 1700
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

MIAMI CENTER REGISTERED AGENTS, LLC.
201 SOUTH BISCAYNE BLVD
SUITE 1700
MIAMI, FL 33131 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: JENA RISSMAN ATLASS

04/28/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: IACOVELLI, CAROL
Address: 201 SOUTH BISCAYNE BLVD., STE 1700
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: IACOVELLI, CAROL
Address: 5255 NW 159TH STREET
City-St-Zip: MIAMI, FL 33014

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CAROL IACOVELLI

MGR

04/28/2005

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