2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

FILED Mar 14, 2005 08:00 AM Secretary of State DOCUMENT # L99000008439 3275 GABRILOVE LIMITED LIABILITY COMPANY Mailing Address Principal Place of Business % STEPHEN GABRILOVE % STEPHEN GABRILOVE 2431 NE 32ND COURT 2431 NE 32ND COURT LIGHTHOUSE POINT, FL 33064 LIGHTHOUSE POINT, FL 33064 CR2E083 (10/03) 02262005 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0966403 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE GABRILOVE, STEPHEN 2431 NE 32ND COURT LIGHTHOUSE POINT, FL 33064 IN THIS SPACE 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 Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9, MGRM TITLE NAME GABRILOVE REAL ESTATE PARTNERSHIP, LTD. STREET ADDRESS 2431 NE 32ND COURT U00000263742 03/14/05-80107-012 50.00 LIGHTHOUSE POINT, FL. 33064 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

11. I hereby certify that the information supplied with this filing does not quality 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:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OF PRINTED NAME OF