


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 09, 2005 08:00 AM
Secretary of State

DOCUMENT # L99000008953	
1. Entity Name ELLIN, LLC	

Principal Place of Business % THE BURTON GROUP, LLC P.O. BOX 370666 MIAMI, FL 33137	Mailing Address % THE BURTON GROUP, LLC P.O. BOX 370666 MIAMI, FL 33137
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01282005No Chg-LLC CR2E083 (10/03)

4. FEI Number 65-0989088	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent GOTTLIEB, STUART M 222 LAKEVIEW AVENUE, SUITE 260 WEST PALM BEACH, FL 33401
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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 _____

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ELLIN SPC INC. 5 NW 39TH STREET, SUITE 3 MIAMI, FL 33127
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 606, Florida Statutes.

SIGNATURE: Steven L. Ingberman **STEVEN L. Ingberman** 02/8/05 (212) 818-8651
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #