## 2005 LIMITED LIABILITY COMPANY

## FILED **ANNUAL REPORT** Aug 11, 2005 08:00 AM Secretary of State **DOCUMENT # M01000001601** 1. Entity Name BDR LARGO ASSOCIATES, L.L.C. Principal Place of Business Mailing Address 247 W. 87TH ST., STE. 8G 247 W. 87TH ST., STE. 8G NEW YORK, NY 10024 NEW YORK, NY 10024 06292005No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For Not Applicable 22-2609149 \$5.00 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent CAPITAL CONNECTION, INC. DO NOT WRITE 417 E. VIRGINIA ST. TALLAHASSEE, FL 32301 IN THIS SPACE The state of the s 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's ignature required when reloctating) Filing Fee is \$50.00 Due by September 7, 2005 MANAGING MEMBERS/MANAGERS 9. MGR TITLE ROSEN, STEPHEN NAME. 1100000376177 118711705-80002-012 **50.0**0 247 WEST 87TH ST STE 8G STREET ADDRESS CITY-ST-ZIP NEW YORK, NY 10024 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TILLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP IIILE NAME STREET ADDRESS CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statules. 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. STEPHEN Koson 2/2-580-7200 SIGNATURE:

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