2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DOCUMENT # M02000002867

1. Entity Name SABBIA, LLC



FILED Apr 24, 2006 08:00 AN Secretary of State

Principal Place of Business

455 GRAND BAY DRIVE KEY BISCAYNE, FL 33149

SIGNATURE:

Mailing Address

66 EAST WALTON ST. 2ND FLOOR CHICAGO, IL 60611



DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

01112006 No Chg-LLC

CR2E083 (11/05)

Applied For 4. FEI Number 36-4393152 Not Applicable \$5.00 Additional

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

LEXISNEXIS DOCUMENT SOLUTIONS INC. 1201 HAYS STREET TALLAHASSEE, FL 32301

DO NOT WRITE 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, 2006			
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FRIEDMANN, DEBORAH 199 E LAKE SHORE DR CHICAGO, IL 60611		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		05,	U00000530829 /06/06-80014-010 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NO	T WRITE
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HTLE 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.			