2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
Aug 31, 2006
Secretary of State

DOCUMENT# M02000003381

Entity Name: FLAGSTONE ISLAND GARDENS, LLC

Current Principal Place of Business:

1674 MERIDIAN AVENUE
3RD FLOOR
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

1674 MERIDIAN AVENUE
3RD FLOOR
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 35-2192850 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: FLAGSTONE MIAMI HOLD, INGS LLC
Address: 1674 MERIDIAN AVE - 3RD FLOOR
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM (X) Delete
Name: FLAGSTONE DEVELOPMEN, T CORPORATION
Address: 1674 MERIDIAN AVE - 3RD FLOOR
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: FLAGSTONE DEVELOPMEN, T CORPORATION
Address: 1674 MERIDIAN AVE - 3RD FLOOR
City-St-Zip: MIAMI BEACH, FL 33139

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: MEHMET BAYRAKTAR MGR 08/31/2006

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