



2005 LIMITED-LIABILITY COMPANY ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 NOV -7 AM 8:17

DOCUMENT # M02000003417			
1. Entity Name FLAGLER POINTE HOLDINGS, LLC		Principal Place of Business 2930 BISCAYNE BLVD. C/O CRESCENT HEIGHTS OF AMERICA MIAMI, FL 33137	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address 2930 BISCAYNE BLVD. C/O CRESCENT HEIGHTS OF AMERICA MIAMI, FL 33137	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 13-4227216		Applied For Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required		07212005 Chg-LLC CR2E083 (10/03)	
6. Name and Address of Current Registered Agent NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office, registered agent, or both in the State of Florida. I am familiar with, and accept the obligations of registered agent.			
REINSTATEMENT 2005			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		DATE _____	
Filing Fee is \$50.00 Due by September 7, 2005		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SK BUSINESS TRUST 2930 BISCAYNE BLVD. MIAMI, FL 33137 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Shlomo Dachoh 2930 Biscayne Boulevard Miami, Florida 33137 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RF BUSINESS TRUST 2930 BISCAYNE BLVD. MIAMI, FL 33137 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Joseph Zdon 2930 Biscayne Boulevard Miami, FL 33137 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MENIN 1998 FAMILY TRUST 2930 BISCAYNE BLVD. MIAMI, FL 33137 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KIRAT, YAFFA 2930 BISCAYNE BOULEVARD MIAMI, FL 33137 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 100061218411 11/07/05--01059--003 ***150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CHILD, KAREN 2930 BISCAYNE BOULEVARD MIAMI, FL 33137 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CHRISTENBURY, SHARON 2930 BISCAYNE BOULEVARD MIAMI, FL 33137 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 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: 		Russell Galbut, Trustee RF Business Trust, Member 08/02/05 (305) 374-5700	