2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

GECRETARY OF STATE OF STATE CORPORATIONS 05 MAY 105-10-2005 90047 022 ****50.00

DOCUMENT	"# M03000003143
1 Fority Name	

BALMY BEAR, LLC

Principal Place of Business 13700 N N 115th Mailing Address

335 ALHAMBRA CIRCLE, SUITE 900 MODE OF EL 355 ALHAMBRA CIRCLE, SUITE 900 PECTAL GOOD, NJ O. S. S. V. 1 C/O CODINA CONSTRUCTION CORP.

C/O CODINA CONSTRUCTION CORP.

CORAL GABLES, FL 39134 33134

231 ELM STRISST

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4192005 No Chg-LLC CR2E083 (10/03)

4. FEI Number 20-0242771

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

5. Name and Address of Current Registered Agent

ANGELO, BARRY & BOLDT, P.A. 515 EAST LAS OLAS BLVD., SUITE 850 FORT LAUDERDALE, FL 33301

DO NOT WRITE IN THIS SPACE

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	named entity submits this statement for the purpose of char ions of registered agent.	nging its registered	d office or registered agent, or both, in the Stat	a of Florida. I am familiar with, and accept
SIGNATURE.				
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered	Agent signature required when reinstiffing)	OATE
Fi D	ling Fee is \$50.00 ue by May 1, 2005			
9.	MANAGING MEMBERS/MANAGERS		·	
TITLE	MGR			
NAME	CODINA CONSTRUCTION CORPORATION			
STREET ADDRESS	355 ALHAMBRA CIRCLE, SUITE 900			
CITY-ST-ZIP	CORAL GABLES, FL 33134			
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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)(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:

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

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