

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # M04000003839

Entity Name
MT-LB CENTRAL FLORIDA PORTFOLIO LLC



Principal Place of Business
13400 VENTURA BOULEVARD
SHERMAN OAKS, CA 91423

Mailing Address
13400 VENTURA BOULEVARD
SHERMAN OAKS, CA 91423



01082006No Chg-LLC

CR2ED83 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired



**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

CORPORATION SYSTEM
100 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

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

110000338260
01/30/06-00089-005 50.00

MANAGING MEMBERS/MANAGERS

MGRM
MT-LB CENTRAL FLORIDA MEZZANINE 6 LLC
13400 VENTURA BOULEVARD
SHERMAN OAKS, CA 91423

**DO NOT WRITE
IN THIS SPACE**

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 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 606, Florida Statutes.

SIGNATURE:

SIGNATURE:

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

Bayan Schen

Date

Daytime Phone #

1-09-06 818-784-4700