

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000004908

Entity Name: CENTRAL TWO, LLC

FILED
Feb 16, 2007
Secretary of State

Current Principal Place of Business:

25 SECOND STREET NORTH
SUITE 200
ST PETERSBURG, FL 33701

New Principal Place of Business:

Current Mailing Address:

25 SECOND STREET NORTH
SUITE 200
ST PETERSBURG, FL 33701

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: AVIRAN, JIMMY
Address: 242 SOUTH 17TH STREET
City-St-Zip: PHILADELPHIA, PA 19103

Title: MGR () Delete
Name: AVIRAN, TAL
Address: 242 SOUTH 17TH STREET
City-St-Zip: PHILADELPHIA, PA 19103

Title: SUFR () Delete
Name: SULFRIN, KALMAN
Address: 242 SOUTH 17TH STREET
City-St-Zip: PHILADELPHIA, PA 19103

Title: SUFR () Delete
Name: KIVITYN, NACHSHON
Address: 242 SOUTH 17TH STREET
City-St-Zip: PHILADELPHIA, PA 19103

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: AVIRAN, JIMMY
Address: 25 2ND STREET NORTH SUITE 210
City-St-Zip: ST PETERSBURG, FL 33701

Title: MGR (X) Change () Addition
Name: AVIRAN, TAL
Address: 25 2ND STREET NORTH SUITE 210
City-St-Zip: ST PETERSBURG, FL 33701

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

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: ANGIE CARLSON

OM

02/16/2007

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