
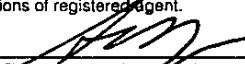
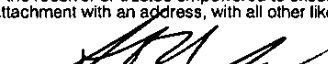


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2005 8:00 am
Secretary of State

04-06-2005 90128 019 ***150.00

DOCUMENT # P04000084225 1. Entity Name EABC PARTNERS MANAGING MEMBER, INC.					
Principal Place of Business 2800 NE 25TH COURT FT LAUDERDALE, FL 33306			Mailing Address 2800 NE 25TH COURT FT LAUDERDALE, FL 33306		
2. Principal Place of Business 2800 NE 26th Court Suite, Apt. #, etc.			3. Mailing Address 2800 NE 26th Court Suite, Apt. #, etc.		
City & State Fort Lauderdale FL Zip 33306		City & State Fort Lauderdale FL Zip 33306		4. FEI Number 20-1175336	
Country USA		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BSPA CORPORATE SERVICES, INC. 350 E LAS OLAS BLVD SUITE 1000 FT LAUDERDALE, FL 33301				7. Name and Address of New Registered Agent Name Steve Santolla Street Address (P.O. Box Number is Not Acceptable) 2800 NE 26th Court City Fort Lauderdale FL Zip Code 33306	
8. 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:  President <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete SANTOLLA, STEVEN 2800 NE 25TH COURT FT LAUDERDALE, FL 33306		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2800 NE 26th Court Ft. Lauderdale FL 33306	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete LIHAN, THOMAS 2800 NE 25TH COURT FT LAUDERDALE, FL 33306		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2800 NE 24th Court Fort Lauderdale FL 33305	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<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	<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	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

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03032005 Chg-P CR2E034 (10/03)