

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # L00000000112

1. Entity Name
KATZ-BAUMGARTEN PROPERTIES, LLC



Principal Place of Business 2665 SOUTH BAYSHORE DRIVE PH-2A COCONUT GROVE, FL 33133	Mailing Address 2665 SOUTH BAYSHORE DRIVE PH-2A COCONUT GROVE, FL 33133
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04262007 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0987629	Applied For Not Applicable
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5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

KATZ, EZRA
 2665 SOUTH BAYSHORE DRIVE
 PH-2A
 COCONUT GROVE, FL 33133

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00
 Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KATZ, EZRA 2665 SOUTH BAYSHORE DRIVE COCONUT GROVE, FL 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BAUMGARTEN, LANG E 2665 SOUTH BAYSHORE DRIVE COCONUT GROVE, FL 33133
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 05/16/07-80023-014 50.00

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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 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: *E Katz* Date: *4/26/07* Daytime Phone #: *(305) 938-8627*

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