


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 31, 2008 08:00 AM
Secretary of State

DOCUMENT # L01000004695 1. Entity Name MARTIN & AZOULAY, L.L.C.	
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Principal Place of Business 8525 S.W. 92 STREET, SUIT B-9 MIAMI, FL 33156	Mailing Address 8525 S.W. 92 STREET, SUIT B-9 MIAMI, FL 33156
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DO NOT WRITE IN THIS SPACE



01212008No Chg-LLC CR2E083 (12/07)

4. FEI Number 65-1087457	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MARTIN, THOMAS F
 8525 S.W. 92 STREET, SUIT B-9
 MIAMI, FL 33156

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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)

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U000000807201
 02/06/08-80072-004 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM AZOULAY, SHARON L 8525 SW 92ND STREET B-9 MIAMI, FL 33156
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MARTIN, THOMAS F 8525 SW 92ND STREET B-9 MIAMI, FL 33156
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: *Sharon Lazoulay* x 1/28/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #