

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000016018

Entity Name: REAL CONCEPTS L.L.C.

FILED
Jun 21, 2007
Secretary of State

Current Principal Place of Business:

11169 SUNSET RIDGE CIRCLE
BOYNTON BEACH, FL 33437

New Principal Place of Business:

Current Mailing Address:

11169 SUNSET RIDGE CIRCLE
BOYNTON BEACH, FL 334327

New Mailing Address:

FEI Number: 22-3865332 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

GOLBOIS, JEFFREY
7700 CONGRESS AVE.
SUITE 3107
BOCA RATON, FL 33487 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: MGRM () Delete
Name: WEISS, DAVID
Address: 6 ROYAL PALM WAY, UNIT 311
City-St-Zip: BOCA RATON, FL 33432

Title: MGR () Delete
Name: WEISS, PAUL
Address: 6 ROYAL PALM WAY, UNIT 311
City-St-Zip: BOCA RATON, FL 33432

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WEISS, DAVID
Address: 11169 SUNSET RIDGE CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33437

Title: MGR (X) Change () Addition
Name: WEISS, LIZA
Address: 11169 SUNSET RIDGE CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33437

I hereby certify that the information supplied with this filing does not qualify 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: DAVID WEISS

MGRM

06/21/2007

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