

**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Feb 01, 2007  
Secretary of State**

DOCUMENT# L03000023524

Entity Name: 1087 BEL LIDO LLC

**Current Principal Place of Business:**

4085 VILLAGE DR., #C  
DELRAY BEACH, FL 33445

**New Principal Place of Business:**

**Current Mailing Address:**

4085 VILLAGE DR., #C  
DELRAY BEACH, FL 33445

**New Mailing Address:**

FEI Number: 41-2100748      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LEVINE, JEFFREY A ESQ.  
4000 N. FEDERAL HIGHWAY, #201  
BOCA RATON, FL 33431 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: REMMERDEN, MARK  
Address: 4085 VILLAGE DR., #C  
City-St-Zip: DELRAY BEACH, FL 33445

Title: MGR (X) Delete  
Name: EGAN, MURIEL  
Address: 4085 VILLAGE DR., #C  
City-St-Zip: DELRAY BEACH, FL 33445

**ADDITIONS/CHANGES:**

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: MARK K. REMMERDEN

MGR

02/01/2007

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