## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000011900

1. Entity Name 1800 WEST LOOP EWE/HOUSTON, LLC



Principal Place of Business

C/O EASTON & ASSOCIATES INC 10165 NW 19TH ST MIAMI, FL 33172 Mailing Address

C/O EASTON & ASSOCIATES INC 10165 NW 19TH ST MIAMI, FL 33172 FILED Apr 26, 2007 08:00 AM Secretary of State



03262007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number	 -	Applied For
43-2042092		Not Applicable
5. Certificate of Status Desired	\$5.00 A	

6. Name and Address of Current Registered Agent

EASTON, EDWARD J C/O EASTON & ASSOCIATES INC 10165 NW 19TH ST MIAMI, FL 33172

the obligations of registered agent.

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
Fi D	iling Fee is \$50.00 ue by May 1, 2007		
9	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADPRESS CITY-ST-ZIP	MGRM EASTON, EDWARD J 10165 NW 19TH STREET MIAMI, FL 33172		H00000734736
TITLE NAME STREET ADDRESS CITY-ST-ZIP			U00000734736 05/10/07-80006-004 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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 preference or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.			

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