

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**May 01, 2007 08:00 AM**  
**Secretary of State**



**DOCUMENT # L04000029270**

1. Entity Name  
**FIZEL LLC**

Principal Place of Business  
**1536 NE QUAYSIDE TERRACE  
MIAMI, FL 33138**

Mailing Address  
**1536 NE QUAYSIDE TERRACE  
MIAMI, FL 33138**



04242007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

**34-1992171**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**KLEIN, TED  
803. PETERS ROAD, SUITE D-104  
PLANTATION, FL 33324**

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

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

9. MANAGING MEMBERS/MANAGERS

TITLE	<b>MGR</b>
NAME	<b>FINE, RHONDA</b>
STREET ADDRESS	<b>1536 NE QUAYSIDE TERRACE</b>
CITY-ST-ZIP	<b>MIAMI, FL 33138</b>

TITLE	<b>MGRM</b>
NAME	<b>ZELMAN, STEVEN</b>
STREET ADDRESS	<b>7833 N.W. 61 TERRACE</b>
CITY-ST-ZIP	<b>PARKLAND, FL 33067</b>

TITLE	
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05/21/07-80015-011 55.00

**DO NOT WRITE  
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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.