2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000030927

1. Entity Name 1410 S.B. PT., LLC



FILED Feb 15, 2007 08:00 A Secretary of State

Principal Place of Business

Mailing Address

9425 HRDING AVENUE SURFSIDE, FL 33154 9425 HRDING AVENUE SURFSIDE, FL 33154



01042007 No Chg-LLC

CR2E083 (11/05)

-		
4.	FEI Number	
	20-1459049	
	ZU-1405U45	

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

FINVARB, ROBERT 1065 KANE CONCOURSE #201 BAY HARBOR FL 33154

DO NOT WRITE IN THIS SPACE

#201 BAY HARBOR, FL 33154		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			
FI D	lling Fee is \$50.00 ue by May 1, 2007	U00000637322 02/26/07-80055-013 50.00	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS MGRM FINVARB, RICHARD 9425 HARDING AVENUE SURFSIDE, FL 33154		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>.</u>	IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS			

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 fiability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

BIGNATURE AND TYPED OR PRINTED NAME OF BIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2/8/07

305-861-353

Daytime Phone #