

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 07, 2007 08:00 AM
Secretary of State

DOCUMENT # L04000041198



1. Entity Name
 ELMANN REALTY OF FLORIDA, LLC

Principal Place of Business
 1304 NORTH BROAD STREET
 HILLSIDE, NJ 07205 US

Mailing Address
 1304 NORTH BROAD STREET
 HILLSIDE, NJ 07205 US



02272007 No Chg-LLC CR2E083 (11/05)

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4. FEI Number 47-0972067	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

LENOFF, STEVEN
 1761 WEST HILLSBORO BOULEVARD
 SUITE 405
 DEERFIELD BEACH, FL 33442

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

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

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM EL MANN, JOSEPH 1304 NORTH BROAD STREET HILLSIDE, NJ 07205
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM ELMANN, CHARLES 1304 NORTH BROAD STREET HILLSIDE, NJ 07205
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM VICTOR, HARA 1304 N BROAD ST HILLSIDE, NJ 07205
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM VITTORIO, DANA 13047 N BRAOD ST HILLSIDE, NJ 07205
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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 03/15/07-80026-023 50.00

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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.

SIGNATURE: **Joseph Elmann** *March 5th 2007* 984369599
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #