


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 15, 2008 08:00 AM
Secretary of State

DOCUMENT # L04000043911

1. Entity Name
METLIN HOLDING COMPANY, LLC



Principal Place of Business 6691 NOB HILL ROAD TAMARAC, FL 33321 US	Mailing Address 6691 NOB HILL ROAD TAMARAC, FL 33321 US
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DO NOT WRITE IN THIS SPACE



01092008No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-1477395	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

**KARLINSKY, FRED - ESQ.
 100 SE 3RD AVENUE
 23RD FLOOR
 FORT LAUDERDALE, FL 33394**

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)

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

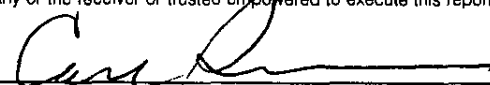
DATE: 02/26/08-80039-012 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SEAMAN, CARL 6691 NOB HILL ROAD TAMARAC, FL 33321
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DO NOT WRITE IN THIS SPACE

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: 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date: **1-10-08** Daytime Phone #: **954-623-6707**