

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000046606

FILED
Apr 30, 2007
Secretary of State

Entity Name: SOPHIE'S CHOICE-4, L.L.C.

Current Principal Place of Business:

6500 COWPEN ROAD
SUITE 204
MIAMI LAKES, FL 33014

New Principal Place of Business:

Current Mailing Address:

6500 COWPEN ROAD
SUITE 204
MIAMI LAKES, FL 33014

New Mailing Address:

FEI Number: 20-1290326 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RARICK, PHILLIP B
6500 COWPEN ROAD
SUITE 204
MIAMI LAKES, FL 33014 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: RARICK, PHILLIP B
Address: 6500 COWPEN ROAD SUITE 204
City-St-Zip: MIAMI LAKES, FL 33014

Title: MGR () Delete
Name: RUIZ, JUAN
Address: 1612 BLUE JAY CIRCLE
City-St-Zip: WESTON, FL 33327

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: PHILLIP B. RARICK MGR 04/30/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date