

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 01, 2007 08:00 A
Secretary of State

DOCUMENT # L04000048007

1. Entity Name
221, LLC



Principal Place of Business

1919 NORTH LAKESIDE DRIVE
LAKE WORTH, FL 33460 US

Mailing Address

1919 NORTH LAKESIDE DRIVE
LAKE WORTH, FL 33460 US



02172007No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

20-2038870

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

ZISKA, MAURA A
222 LAKEVIEW AVENUE
SUITE 950
WEST PALM BEACH, FL 33401

**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**

U000000652711
03/12/07-80030-001 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	MINKOFF, BURTON S
STREET ADDRESS	1919 NORTH LAKESIDE DRIVE
CITY-ST-ZIP	LAKE WORTH, FL 33460

TITLE	
NAME	
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CITY-ST-ZIP	

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CITY-ST-ZIP	

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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

Daytime Phone #

2/25/07