

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000062557

1. Entity Name
DEZER QUOGUE, LLC



Principal Place of Business
18001 COLLINS AVENUE
31ST FLOOR
SUNNY ISLES BEACH, FL 33160 US

Mailing Address
18001 COLLINS AVENUE
31ST FLOOR
SUNNY ISLES BEACH, FL 33160 US



04182007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
13-4301232

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

BRANT, BARRY M CPA
200 SOUTH BISCAYNE BLVD.
6TH FLOOR
MIAMI, FL 33131

**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**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	DEZER, NEOMI
STREET ADDRESS	18001 COLLINS AVENUE, 31ST FLOOR
CITY-ST-ZIP	SUNNY ISLES BEACH, FL 33160

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05/16/07-80017-012 50.00

**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:

Neomi Dezer

L. Salmon

4/24/07 2129291285

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

Date

Daytime Phone #