


### 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 27, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # L05000090496**

1. Entity Name  
GULSAGE INVESTMENTS, L.L.C.



Principal Place of Business  
508 EAST BOYNTON BEACH BLVD  
BOYNTON BEACH, FL 33435

Mailing Address  
1847 NE 211 LANE  
NORTH MIAMI BEACH, FL 33179



04252007 No Chg-LLC CRZE083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
20-3505582

Applied For  
 Not Applicable

5. Certificate of Sales Desired  \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  
MOSKOVITZ, DANIEL ESQ  
48 EAST FLAGLER STREET, PH-104  
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 his or her approver. (OFFICER, REGISTERED AGENT, REGISTERED PROFESSIONAL SERVICE PROVIDER)

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

000000738364  
05/11/07-80064-018 90.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SAGER, STEVEN 508 EAST BOYNTON BEACH BLVED BOYNTON BEACH, FL 33435
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GULLO, JOSEPH 508 EAST BOYNTON BEACH BLVED BOYNTON BEACH, FL 33435
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**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 008, Florida Statutes.

SIGNATURE: *Joseph GULLO* 4/25/07 305-9369499  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE