


**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED  
Jul 22, 2008 08:00 AM  
Secretary of State**

DOCUMENT # L06000019187 1. Entity Name 1907 HOLLYWOOD LLC	
---	---

Principal Place of Business 275 MADISON AVENUE, SUITE 702 C/O JENEL MANAGEMENT CORP. NEW YORK, NY 10016	Mailing Address 275 MADISON AVENUE, SUITE 702 C/O JENEL MANAGEMENT CORP. NEW YORK, NY 10016
--	--



**DO NOT WRITE IN THIS SPACE**

07032008No Chg-LLC	CR2E083 (12/07)
4. FEI Number 20-8853441	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GOLDMAN, JAY  
USA COMMERCIAL RESIDENTIAL  
21406 WEST DIXIE HWY  
AVENTURA, FL 33180

**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 Jay S Goldman J. Goldman DATE 7.17.08  
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 Due by September 12, 2008** In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. U00000955870  
07/22/08-80013-018 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DUSHEY, JACK 275 MADISON AVENUE, SUITE 702 NEW YORK, NY 10016
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM AUG INVESTMENTS LLC 1900 SUNSET HARBOUR DRIVE APT. 2202 MIAMI BEACH, FL 33139
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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 608, Florida Statutes.

SIGNATURE: JACK DUSHEY J. Dushey Date 7.09.08 (212) 889-6405  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Daytime Phone #