


**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Mar 16, 2006 8:00 am**  
**Secretary of State**

03-16-2006 90033 039 \*\*\*\*50.00

**DOCUMENT # L94000000059**

1. Entity Name  
**DAVID MAYER, L.C.**




Principal Place of Business 2002 GRANT ST. HOLLYWOOD, FL 33020	Mailing Address 125 N. 46TH AVENUE HOLLYWOOD, FL 33021-6601
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
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Zip	Country	Zip	Country
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03042006 Chg-LLC CR2E083 (11/05)

4. FEI Number 59-1934035	Applied For Not Applicable
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**6. Name and Address of Current Registered Agent**

GOTTLIEB, BRUCE M  
 125 N. 46TH AVENUE  
 HOLLYWOOD, FL 33021-6601

**7. Name and Address of New Registered Agent**

Name \_\_\_\_\_  
 Street Address (P.O. Box Number is Not Acceptable) \_\_\_\_\_  
 City **FL** Zip Code \_\_\_\_\_

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$50.00 Due by May 1, 2006**

**Make check payable to Florida Department of State**

9. MANAGING MEMBERS / MANAGERS				10. ADDITIONS / CHANGES			
TITLE	MGR	<input checked="" type="checkbox"/> Delete		TITLE	MGR	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	ZIEFER, MAYER			NAME	Gottlieb, Kenneth A.		
STREET ADDRESS	2002 GRANT ST.			STREET ADDRESS	125 N. 46 Avenue		
CITY-ST-ZIP	HOLLYWOOD, FL 33020			CITY-ST-ZIP	Hollywood, FL 33021		
TITLE	MGR	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	GOTTLIEB, BRUCE M			NAME			
STREET ADDRESS	125 N. 46TH AVENUE			STREET ADDRESS			
CITY-ST-ZIP	HOLLYWOOD, FL 33021			CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			

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:** *Bruce M. Gottlieb* *Manager* 2/22/06 (954) 966-7900

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

ATTACHMENT

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**Gottlieb & Gottlieb**  
ATTORNEYS AT LAW

A Professional Association

www.gottlielaw.com

Bruce M. Gottlieb

125 NORTH 46TH AVENUE, HOLLYWOOD, FLORIDA 33021-6601

Broward 954-966-7900

Kenneth A. Gottlieb

Dade 305-524-4777

Division of Corporations

P. O. Box 16478

Tallahassee, FL 32314

20017102  
#L94000000059

Toll Free 800-330-7900

Fax 954-966-7905

March 7, 2006

RE: 2006 Uniform Business Reports

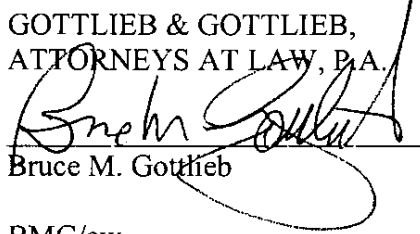
OUR FILE NUMBER: 4698

Gentlemen:

Enclosed, for filing with the Florida Department of State, is the 2006 Annual Report for David Mayer, L.C., together with the filing fee of \$50.00.

Very truly yours,

GOTTLIEB & GOTTLIEB,  
ATTORNEYS AT LAW, P.A.

  
Bruce M. Gottlieb

BMG/aw

Enclosures