
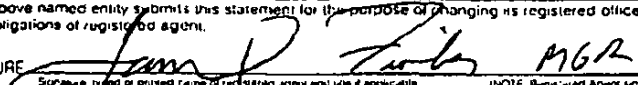


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 04/26/07 90029 033
 \$ 50.00

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L96000001096		 FILED SECRETARY OF STATE DIVISION OF CORPORATIONS JUN 15 PM 1:18	
1. Entity Name 7800 NE 2ND AVE, L.C.		Principal Place of Business 419 W. 49TH ST. # 106 HIALEAH, FL 33012-3602	
2. Principal Place of Business - No P.O. Box # 419 WEST 49TH ST.		3. Mailing Address 419 WEST 49TH ST.	
Suite, Apt. #, etc. # 105		Suite, Apt. #, etc. # 105	
City & State HIALEAH, FL.		City & State HIALEAH, FL.	
Zip 33012	Country U.S.A.	Zip 33012	Country U.S.A.
4. FEI Number 65-0704605		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent 7155 NW 2ND CT., L.C. 419 W. 49TH ST. #106 HIALEAH, FL 33012-3602		7. Name and Address of New Registered Agent Name: REDZ PROPERTY CARE, INC Street Address (P.O. Box Number is Not Acceptable): 419 W 49TH ST. # 105 City: HIALEAH FL Zip Code: 33012	
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		DATE	
 MGR		4/9/07	

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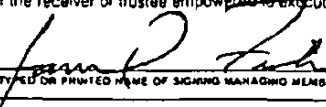
03192007 Chg-LLC CR2E083 (12/06)

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

Make check payable to
 Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR FISHER, RONALD P 1801 CENTURY PARK E., #2400 LOS ANGELES, CA 900672326 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR FISHER, RONALD P. 419 W 49TH ST # 105 HIALEAH, FL. 33012 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addit
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR FISHER, JAMES Q 1801 CENTURY PARK E., #2400 LOS ANGELES, CA 900672326 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR FISHER, JAMES Q. 419 W 49TH ST. # 105 HIALEAH, FL. 33012. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addit
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR FISHER, RICHARD J 1801 CENTURY PARK E., #2400 LOS ANGELES, CA 900672326 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR FISHER, RICHARD J 419 W. 49TH ST. #105 HIALEAH, FL. 33012 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addit
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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:  DATE: 4/9/07

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