


**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Mar 03, 2008 8:00 am**  
**Secretary of State**

03-03-2008 90399 002 \*\*\*138.75

**DOCUMENT # L99000001917**

1. Entity Name  
 7800 CONGRESS, L.C.



Principal Place of Business  
 6530 W. ROGERS CIRCLE STE 31  
 BOCA RATON, FL 33487

Mailing Address  
 6530 W. ROGERS CIRCLE, SUITE 31  
 BOCA RATON, FL 33487

2. Principal Place of Business - No P.O. Box #  
 4755 Technology Way Ste. 202  
 Boca Raton, FL 33431-3338

3. Principal Place of Business - P.O. Box #  
 4755 Technology Way Ste. 202  
 Boca Raton, FL 33431-3338

Zip Country Zip Country



02052008 Chg-LLC CR2E083 (12/06)

4. FEI Number  
 65-0921595

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent  
 KIRSCHNER, MITCHELL B ESQ  
 MANDEL WEISMAN & KIRSCHNER, P.A.  
 2101 CORPORATE BOULEVARD, N.W., SUITE 300  
 BOCA RATON, FL 33431

7. Name and Address of New Registered Agent  
 Name Sean Leder  
 Street Address (P.O. Box Number is Not Acceptable)  
4755 Technology Way - Suite 202  
 City Boca Raton FL 33431

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 2/27/08

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**  
**After May 1, 2008 Fee will be \$538.75**

Make check payable to:  
 Florida Department of State

9. MANAGING MEMBERS / MANAGERS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
MGR	LEDER, SEAN	6530 W ROGERS CIR, STE 31	BOCA RATON, FL 33487	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

10. ADDITIONS / CHANGES

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
		4755 Technology Way Ste. 202	Boca Raton, FL 33431-3338	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: Sean Leder 2/27/08 561-995-7878

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