2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000014845

1. Entity Name 4510, LLC



Principal Place of Business

Mailing Address

939 MONCRIEFF ROAD

SIGNATURE:

MONTREAL Quebec, Canada, H3R3A-3 939 MONCRIEFF ROAD MONTREAL QUEBEC, CANADA, H3R3A-3

FILED Feb 19, 2007 8:00 am Secretary of State

02-19-2007 90195 006 ****50.00



01312007 No Chg-LLC

CR2E083 (11/05)

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Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

WILLNER, ROBIN I 18851 NW 29TH AVENUE, SUITE 900 AVENTURA, FL 33180

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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 title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE	
Filing Fee is \$50.00 Due by May 1, 2007				
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM 3267351 CANADA INC. 939 MONCRIEFF ROAD QUEBEC, CANADA, H3R3A3			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-SI-ZIP		DO NOT W	RITE	
NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SP	ACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS 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.				

3267351 CANAGA