## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

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## **DOCUMENT # L05000043653**

1. Entity Name

1050 N.W. 15TH STREET, LLC



Principal Place of Business

901 N. FLAGLER DRIVE

WEST PALM BEACH, FL 33401 US

Mailing Address

901 N. FLAGLER DRIVE

WEST PALM BEACH, FL 33401

US

FILED Feb 26, 2007 08:00 AM Secretary of State



01252007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-2802991 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6.	Name	and Address	of Current	Registered Agent

ROSECAN, LAUREN R 901 N. FLAGLER DRIVE WEST PALM BEACH, FL 33401

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		'				
	named entity submits this statement for the purpose of chains of registered agent.	nging its registered office or registered a	agent, or bo	th, in the State of Flo	orida. I am familia	with, and accept
SIGNATURE.						
	Signature, typed or printed name of registered agent and title if applicable,	(NOTE: Registered Agent algorature required when reinstating)		DATE		
	iling Fee is \$50.00 ue by May 1, 2007 MANAGING MEMBERS/MANAGERS		1:	·		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MM ROSECAN REALTY LTD 901 N FLAGLER DRIVE W PALM BEACH, FL 33401			000000 -03/07/07	1648458 -80009-016	50.00
TITLE			•	oorun or	A CONTRACTOR OF THE PARTY OF TH	THE THE THE

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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:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATE

260107

5.61-832-4411

Daytime Phone #