2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000000209

1. Entity Name

DOUGLAS KAHANE, LLC

FILED Feb 12, 2008 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

5 CARL COURT

NAME STREET ADDRESS CITY-ST-ZIP TITLE

STREET ADDRESS
CITY-ST-ZIP

PO BOX 64

DO NOT WRITE IN THIS SPACE

BEVERLY HILLS, FL 34465 US

PO BOX 640251 BEVERLY HILLS,, FL 34464-0251 US



01032008No Chg-LLC

CR2E083 (12/07)

4. FEI Number			
20-4024833			

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

KAHANE, DOUGLAS I 5 CARL COURT BEVERLY HILLS, FL 34465		IN '	DO NOT WRITE IN THIS SPACE red office or registered agent, or both, in the State of Fiorida. I am familiar with, and accept	
	ions of registered agent.	iging its registered office of registered agent, or bu	of the State of Profice. Familian with, and accept	
SIGNATURE_	Signeture, typed or printed name of registered agent and title if applicable.	(NOTE Registered Agent signature required when relinstating)	DATE	
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75				
9.	MANAGING MEMBERS/MANAGERS			
TITLE	MGRM		•	
NAME CTREET ADDRESS	KAHANE, DOUGLAS IAN			
STREET ADDRESS CITY-ST-ZIP	PO BOX 640251 BEVERLY HILLS, FL 344640251			
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STREET ADDRESS CITY-ST-ZIP				
TITLE				

11. I hereby certify that the information supplied with this filling 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.

IGNATURE AND TYPESOR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2/3/08 3/16 1718

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