


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 02, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000039420 1. Entity Name 411 AQUA LLC	
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Principal Place of Business 411 MICHIGAN AVENUE MIAMI BEACH, FL 33139	Mailing Address 411 MICHIGAN AVENUE MIAMI BEACH, FL 33139
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DO NOT WRITE IN THIS SPACE



03252008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-4794897	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent THOMAS G. SHERMAN, ESQ., P.A. 90 ALMERIA AVENUE CORAL GABLES, FL 33134

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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 _____ (NOTE: Registered Agent signature required when reinstating) U000000878269
Signature, typed or printed name of registered agent and title if applicable. 04/14/08-80047-015 138.75

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HARARI, PHILIPPE 411 MICHIGAN AVENUE MIAMI BEACH, FL 33139
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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:

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

Date

Daytime Phone #

[Signature] Philippe Harari 03/28/08 351835K1