2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L00000000112

4 Entity Name

KATZ-BAUMGARTEN PROPERTIES, LLC



Principal Place of Business

2665 SOUTH BAYSHORE DRIVE PH-2A

COCONUT GROVE, FL 33133

Mailing Address

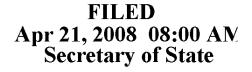
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2665 SOUTH BAYSHORE DRIVE

PH-2A

DO NOT WRITE IN THIS SPACE

COCONUT GROVE, FL 33133





04152008 No Chg-LLC

CR2E083 (12/07)

4.	FEI Number				Applied For
	65-0987629				Not Applicable
5	Certificate of Status Desired	П ;	\$5.0	0	Additional

6. Name and Address of Current Registered Agent

KATZ, EZRA 2665 SOUTH BAYSHORE DRIVE PH-2A COCONUT GROVE, FL 33133 DO NOT WRITE

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 reinstalling)

DATE

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 KATZ, EZRA 2665 SOUTH BAYSHORE DRIVE COCONUT GROVE, FL 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BAUMGARTEN, LANG E 2665 SOUTH BAYSHORE DRIVE COCONUT GROVE, FL 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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DO NOT WRITE 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

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

4/16/08

(35) 938-8647

Daylime Phone #