

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 06, 2006 08:00 AM
Secretary of State

DOCUMENT # L00000000898 1. Entity Name THE THIEME FAMILY, LLC	
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Principal Place of Business 4771 N. FEDERAL HIGHWAY POMPANO BEACH, FL 33064	Mailing Address 4771 N. FEDERAL HIGHWAY POMPANO BEACH, FL 33064
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DO NOT WRITE IN THIS SPACE



03042006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
65-0974843

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent
**WICH, THOMAS M ESQ.
WICH, WICH & WICH, P.A.
2400 E. COMMERCIAL BLVD., STE. 620
FT. LAUDERDALE, FL 33308**

**DO NOT WRITE
IN THIS SPACE**

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 reappointing)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM THIEME, DOUGLAS A 2881 NE 26TH PLACE FORT LAUDERDALE, FL 33306
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM THIEME, ERIN H 2881 NE 26TH PLACE FORT LAUDERDALE, FL 33306
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U00000494894
04/20/06-80065-016 50.00

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 #