

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 15, 2007 8:00 am
Secretary of State

02-22-2007 90278 009 ****55.00

DOCUMENT # L00000002721

1. Entity Name
NEUWIRTH INVESTMENTS, L.C.



Principal Place of Business
**413 COCONUT ISLE DR.
FORT LAUDERDALE, FL 33301**

Mailing Address
**413 COCONUT ISLE DR.
FORT LAUDERDALE, FL 33301**



01232007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0990344

Applied For
Not Applicable

5. Certificate of Status Desired ☒

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**GLASSER, GENE
C/O GREENSPOON MARDER PA
100 W CYPRESS CREEK RD, STE 700
FORT LAUDERDALE, FL 33309**

**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 renewing.)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. **MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR NEUWIRTH, BARBARA 413 COCONUT ISLE DRIVE FT LAUDERDALE, FL
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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: *Barbara Newirth*

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

BARBARA

NEUWIRTH

3-11-2007

Date

Daytime Phone #

(954) 765-5566