

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 09, 2008 08:00 AM
Secretary of State

DOCUMENT # L00000011710

1. Entity Name
E.S. KAPLAN - SUNRISE, LLC.



Principal Place of Business
**751 SW 66TH AVE.
NORTH LAUDERDALE, FL 33068**

Mailing Address
**751 SW 66TH AVE.
NORTH LAUDERDALE, FL 33068**

DO NOT WRITE IN THIS SPACE



02272008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number
65-1050088

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**KAPLAN, EDWARD S
751 SW 66TH AVE.
NORTH LAUDERDALE, FL 33068**

**DO NOT WRITE
IN THIS SPACE**

I, 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 reinstating)

DATE _____

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

000000889317
04/22/08-80049-014 143.75

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
EDWARD, KAPLAN S TRUSTEE
751 SW 66TH AVE.
NORTH LAUDERDALE, FL 33068**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
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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 #

4/7/08 8/9540793475