

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000011885

**FILED**  
**Mar 12, 2007**  
**Secretary of State**

**Entity Name:** LAW FIRM OF KAREN SPIGLER, LLC

**Current Principal Place of Business:**

499 NW 70TH AVE.  
SUITE 105  
PLANTATION, FL 33317

**New Principal Place of Business:**

**Current Mailing Address:**

499 NW 70TH AVE.  
SUITE 105  
PLANTATION, FL 33317

**New Mailing Address:**

**FEI Number:** 65-1041880

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SPIGLER, KAREN J  
499 NW 70TH AVE. #105  
PLANTATION, FL 33317 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: SPIGLER, KAREN  
Address: 499 NW 70TH AVE. #105  
City-St-Zip: PLANTATION, FL 33317

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: KAREN J SPIGLER

MGR

03/12/2007

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date