

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000000425

Entity Name: PELCHA & TALEFF, LLC

FILED
May 01, 2007
Secretary of State

Current Principal Place of Business:

2425 EAST COMMERCIAL BLVD.
SUITE 303
FORT LAUDERDALE, FL 33308 US

New Principal Place of Business:

12345 77TH PLACE N.
WEST PALM BEACH, FL 33412 US

Current Mailing Address:

2425 EAST COMMERCIAL BLVD.
SUITE 303
FORT LAUDERDALE, FL 33308 US

New Mailing Address:

12345 77TH PLACE N
WEST PALM BEACH, FL 33412 US

FEI Number: 65-1070883 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

TALEFF, JEFFREY W
2205 HOLLYWOOD BLVD.
HOLLYWOOD, FL 33020 US

Name and Address of New Registered Agent:

TALEFF, JEFFREY W
12345 77TH PLACE N
WEST PALM BEACH, FL 33412 US

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: JEFFREYTALEFF

05/01/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: TALEFF, JEFFREY W
Address: 2205 HOLLYWOOD BLVD.
City-St-Zip: HOLLYWOOD, FL 33020

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: TALEFF, JEFFREY W
Address: 12345 77TH PLACE N
City-St-Zip: WEST PALM BAECH, FL 33412

I hereby certify that the information supplied with this filing does not qualify 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: JEFFREY TALEFF

MGRM

05/01/2007

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