

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 24, 2008 8:00 am
Secretary of State

03-24-2008 90239 013 ***143.75

DOCUMENT # L01000001262

1. Entity Name
EAST OCEAN ACQUISITIONS, LLC



Principal Place of Business

2700 NORTH 29TH AVE
SUITE 108 16330 MIRASOL WAY
HOLLYWOOD, FL 33020
DELRAY BEACH, FL 33446

Mailing Address

2700 NORTH 29TH AVE
SUITE 108 16330 MIRASOL WAY
HOLLYWOOD, FL 33020
DELRAY BEACH, FL 33446

60016838



01212008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1074739

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

WOLOFSKY, HOWARD
2700 NORTH 29TH AVE
SUITE 108
HOLLYWOOD, FL 33020
SAN RICHTER
16330 MIRASOL WAY
DELRAY BEACH, FL
33446

**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 reinstating)

DATE

2/28/08

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

9. MANAGING MEMBERS/MANAGERS

TITLE	P
NAME	WOLOFSKY, HOWARD
STREET ADDRESS	2700 NORTH 29TH AVE SUITE 108
CITY - ST - ZIP	HOLLYWOOD, FL 33020 53 CASUARINA CONCOURSE CORAL GABLES, FL 33143
TITLE	P
NAME	BURSTEIN, ROBERT
STREET ADDRESS	2700 NORTH 29TH AVE SUITE 108 129 ROSALES CT.
CITY - ST - ZIP	HOLLYWOOD, FL 33020 CORAL GABLES, FL 33143
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**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:

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

2/28/08

Date

(561) 865-3456

Daytime Phone #