


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 08, 2007 08:00 AM
Secretary of State

DOCUMENT # L01000001392

1. Entity Name
F & C KOCHEN, L.L.C.



Principal Place of Business 7401 NW 32 AVE REAR MIAMI, FL 33147	Mailing Address 7401 NW 32 AVE REAR MIAMI, FL 33147
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DO NOT WRITE IN THIS SPACE



03052007No Chg-LLC CR2E083 (11/05)

4. FEI Number 65-1076605	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**KOCHEN, CARLOS
 7401 NW 32 AVE REAR
 MIAMI, FL 33147**

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing)

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KOCHEN, CARLOS 7401 NW 32 AVE REAR MIAMI, FL 33147
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KOCHEN, FANNIE 7401 NW 32 AVE REAR MIAMI, FL 33147
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 03/19/07-80018-004-50.00

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 808, Florida Statutes.

SIGNATURE:  **3/5/07** **305-693-8400**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER, MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #