2008 LMATED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L01000004514

1. Entity Name 1601 MANAGEMENT, LLC



FILED Jan 24, 2008 08:00 AN Secretary of State

Principal Place of Business

1601 N.E. 26TH STREET WILTON MANORS, FL 33305

Mailing Address

1601 N.E. 26TH STREET WILTON MANORS, FL 33305



01172008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number	Applied For
65-1086364	Not Applicable
5. Certificate of Status Desired	\$5.00 Additional

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MARRINSON, RALPH A 1601 N.E. 26TH STREET WILTON MANORS, FL 33305

SIGNATURE:

DO NOT WRITE IN THIS SPACE

		<u> </u>		<u>• </u>		
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 require	Agent signature required when reinstating) DATE			
	NOWIII FEE IS \$138.75 71, 2008 Fee will be \$538.75					
9,	MANAGING MEMBERS/MANAGERS		* * * * * * * * * * * * * * * * * * * *			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MARRINSON, RALPH A 1601 NE 26 STREET FORT LAUDERDALE, FL 33305					
TITLE NAME STREET ADDRESS CITY-ST-ZIP			فسادة سادفساد فسادات	00795105 8-80035-007 138.75		
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indicated	certify that the information supplied with this filling does not que on this report is true and accurate and that my signature shall bility company or the receiver or trustee empowered to execut	I have the same legal effect as	if made under oath; that I am a i	s. I further certify that the information managing member or manager of the		

Ralph A. Marrinson

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

Daytime Phone #