

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 10, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # L01000006780**

1. Entity Name

GGH&S INVESTMENT CO., LLC



Principal Place of Business

222 SOUTH MILITARY TRAIL  
DEERFIELD BEACH, FL 33442

Mailing Address

222 SOUTH MILITARY TRAIL  
DEERFIELD BEACH, FL 33442

**DO NOT WRITE IN THIS SPACE**



02132006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number

65-0086590

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

BOOKSTEIN, MERRILL A  
COUNSELOR AT LAW, P.A.  
2499 GLADES ROAD, SUITE 308  
BOCA RATON, FL 33431

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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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when retreating)

DATE

**Filing Fee is \$50.00  
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	GORDON, MARTIN
STREET ADDRESS	222 S MILITARY TRAIL
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442
TITLE	MGRM
NAME	GORDON, SEYMOUR
STREET ADDRESS	1201 S OCEAN SR, APT 1601N
CITY-ST-ZIP	HOLLYWOOD, FL 33019
TITLE	MGRM
NAME	HAND, MANUEL
STREET ADDRESS	1201 S OCEAN DR
CITY-ST-ZIP	HOLLYWOOD, FL 33019
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/25/06-80027-018 50.00

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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

Date

Daytime Phone #