

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

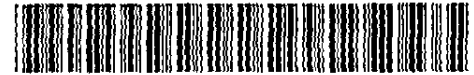
DOCUMENT # L01000008413

1. Entity Name

824 JEFFERSON AVENUE, L.L.C.



**FILED**  
**Apr 06, 2006 08:00 AM**  
**Secretary of State**



1st MOORE CR2E083 (10/05)

4. FEI Number **65-0448613** Applied For ☐ Not Applied ☐

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GORFINKEL, NESTOR B  
20818 WEST DIXIE HIGHWAY  
AVENTURA FL 33180

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Florida Department of State**  
**Due By May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE MGR  
NAME BRAFMAN, YAAKOV  
STREET ADDRESS P.O. BOX 403353  
CITY- ST- ZIP MIAMI BEACH FL 33140 ☐ Delete

TITLE MGR  
NAME WEBERMAN, ELI  
STREET ADDRESS P.O. BOX 403353  
CITY- ST- ZIP MIAMI BEACH FL 33140 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP ☐ Delete

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP ☐ Change ☐ Add

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP ☐ Change ☐ Add

TITLE  
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CITY- ST- ZIP ☐ Change ☐ Add

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TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP ☐ Change ☐ Add

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

*[Handwritten Signature]*  
Member

4/4/06