

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 13, 2007 08:00 AM
Secretary of State

DOCUMENT # L01000008837

1. Entity Name
DANIA BEACH INVESTMENTS, LLC



Principal Place of Business
**25 NORTH FEDERAL HIGHWAY
DANIA BEACH, FL 33004**

Mailing Address
**P.O. BOX 1814
DANIA BEACH, FL 33004**



03182007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
52-2323339

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**TRINKLER, REBECCA S
25 NORTH FEDERAL HIGHWAY
DANIA BEACH, FL 33004**

**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 _____

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

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
WOHL, TAMARA
25 NORTH FEDERAL HIGHWAY
DANIA BEACH, FL 33004**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
TRINKLER, REBECCA S
25 NORTH FEDERAL HIGHWAY
DANIA BEACH, FL 33004**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
TRINKLER, ROBERT M
25 NORTH FEDERAL HIGHWAY
DANIA BEACH, FL 33004**

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

Date

Daytime Phone #

4/2/2007 (854) 927-1040