

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000010492

Entity Name: 543 BREAKERS, LLC

FILED
Apr 09, 2007
Secretary of State

Current Principal Place of Business:

543 BREAKERS AVE.
FT. LAUDERDALE, FL 33304

New Principal Place of Business:

Current Mailing Address:

543 BREAKERS AVE.
FT. LAUDERDALE, FL 33304

New Mailing Address:

FEI Number: 65-1118983

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEBENEDICTUS, ROBERT N
543 BREAKERS AVE.
FT. LAUDERDALE, FL 33304 US

Name and Address of New Registered Agent:

DEBENEDICTIS, ROBERT N
543 BREAKERS AVE.
FT. LAUDERDALE, FL 33304 US

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.

SIGNATURE: ROBERT N DEBENEDICTIS

04/09/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DEBENEDICTUS, ROBERT
Address: 1164 E. OAKLAND PARK BLVD
City-St-Zip: FT LAUDERDALE, FL 33334

Title: MGRM () Delete
Name: GALLUCCIO, PAUL
Address: 1164 E. OAKLAND PARK BLVD
City-St-Zip: FT LAUDERDALE, FL 33334

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DEBENEDICTIS, ROBERT N
Address: 625 ORTON AVE
City-St-Zip: FT LAUDERDALE, FL 33304

Title: MGRM (X) Change () Addition
Name: GALLUCCIO, PAUL
Address: 533 ORTON AVE
City-St-Zip: FT LAUDERDALE, FL 33304

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: ROBERT N DEBENEDICTIS

MGR

04/09/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date