2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L01000018449

1. Entity Name
5801 CONGRESS AVENUE, L.L.C.

Principal Place of Business	Malling Address
5801 CONGRESS AVE. BOCA RATON, FL 33487	5801 CONGRESS AVE. BOCA RATON, FL 33487

DO NOT WRITE IN THIS SPACE

02062007 No Chg-LLC   CR2E083 (11/05)

4. FEI Number	Applied For
65-1143191	Not Applicable

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

6. Name and Address of Current Registered Agent

MOMBACH, GEOFFREY S
C/O MOMBACH, BOYLE & HARDIN, P.A.
500 EAST BROWARD BOULEVARD, SUITE 1950
FT. LAUDERDALE, FL 33394

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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 reinstating)   DATE

Filing Fee is $50.00
Due by May 1, 2007

U00000638391
02/27/07-80029-016 50.00

9.	MANAGING MEMBERS/MANAGERS	
TITLE	MGRM	
NAME	WOLF, STEVE.	
STREET ADDRESS	5801 N. CONGRESS AVE.	
CITY-ST-ZIP	BOCA RATON, FL 33487	
TITLE		
NAME		
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CITY-ST-ZIP		

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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: _____   Steve Wolf   2/12/07   561-498-5600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #