


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2007 08:00 AM
Secretary of State


DOCUMENT # L02000001966

1. Entity Name
HEWS WOOLBRIGHT, LLC



Principal Place of Business 1700 W. WOOLBRIGHT ROAD BOYNTON BEACH, FL 33426	Mailing Address 4901 NW 17TH WAY SUITE 103 FT. LAUDERDALE, FL 33309
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DO NOT WRITE IN THIS SPACE



04182007No Chg-LLC CR2E083 (11/05)

4. FEI Number 80-0030086	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**LEVY, ALAN
 4901 NW 17TH WAY STE 103
 FORT LAUDERDALE, FL 33309**

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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 _____ (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 LAZAR, MICHAEL 4901 NW 17TH WAY #103 FORT LAUDERDALE, FL 33309
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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]* **Managing Member** **4/22/07** **954 491-5505**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #