

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jul 30, 2007 8:00 am**  
**Secretary of State**

04-25-2007 90034 047 \*\*\*\*50.00

**DOCUMENT # L02000005984**

1. Entity Name  
SOUTHERN REALTY & INVESTMENT OF SOUTH  
FLORIDA, LLC



Principal Place of Business  
3327 NE 32 STREET  
FT. LAUDERDALE, FL 33308

Mailing Address  
3327 NE 32 STREET  
FT. LAUDERDALE, FL 33308

2. Principal Place of Business - No P.O. Box #

550 SW 12th Ave

Suite, Apt. #, etc.

Blk #4

City & State

Deerfield Beach, FL

Zip

33442

Country

USA

3. Mailing Address

550 SW 12th Ave

Suite, Apt. #, etc.

Blk #4

City & State

Deerfield Beach, FL

Zip

33442

Country

USA

6. Name and Address of Current Registered Agent

DELUCA, GARY  
3327 NE 32ND ST  
FORT LAUDERDALE, FL 33308

7. Name and Address of New Registered Agent

Name

DeLuca, Gary

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

550 SW 12th Ave.

City

Deerfield Beach

FL

Zip Code

33442

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**

**Make check payable to  
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
MGRM  
DELUCA, GARY  
340 SUNSET DRIVE #1511  
FORT LAUDERDALE, FL 33301

☐ Delete

10. ADDITIONS/CHANGES

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

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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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

7/24/07