

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000007203

FILED
Apr 26, 2006
Secretary of State

Entity Name: LOB, LLC

Current Principal Place of Business:

1700 SE 15TH ST
103
FORT LAUDERDALE, FL 33316

New Principal Place of Business:

Current Mailing Address:

1700 SE 15TH ST
103
FORT LAUDERDALE, FL 33316

New Mailing Address:

FEI Number: 04-3631501

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLEISHER, DAVID A
1700 SE 15TH ST #103
FORT LAUDERDALE, FL 33316 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FLEISHER, DAVID A
Address: 1700 SE 15TH ST #103
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: MGRM () Delete
Name: SEXTON, DAVID W III
Address: 1313 MANDARIN ISLE
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: MGR () Delete
Name: FLAMM, JEFF
Address: 925 LEMONWOOD COURT
City-St-Zip: HOLLYWOOD, FL 33019

Title: MGR () Delete
Name: FLAMM, HOWARD
Address: 371 CHANNELSIDE WALK WAY #1003
City-St-Zip: TAMPA, FL 33602

Title: MGR () Delete
Name: FLAMM, BRUCE
Address: 3098 LAKEWOOD CIRCLE
City-St-Zip: WESTON, FL 33332

Title: MGR () Delete
Name: SOSNOWITZ, ANDREW
Address: 22659 N 39TH PLACE
City-St-Zip: PHOENIX, AZ 85050

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DAVID A FLEISHER

MGRM

04/26/2006

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