

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 30, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # L02000011782**

1. Entity Name  
**HANSE, L.L.C.**



Principal Place of Business  
**2500 NORTH FEDERAL HWY., STE. 201  
FORT LAUDERDALE, FL 33305**

Mailing Address  
**2500 NORTH FEDERAL HWY., STE. 201  
FORT LAUDERDALE, FL 33305**



**DO NOT WRITE IN THIS SPACE**

04122005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number  
**41-2039713**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**DWV INVESTMENTS  
2500 N. FEDERAL HWY, STE 201  
JACKSONVILLE, FL 32205**

**DO NOT WRITE  
IN THIS SPACE**

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 reinstalling)

DATE

**Volkmar Dirksen 4/11/05**

**Filing Fee is \$50.00  
Due by May 1, 2005**

**U000000347415  
04/30/05-80114-013 50.00**

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**MGRM  
DIRKSEN, VOLKMAR  
2500 N. FEDERAL HWY, STE 201  
FORT LAUDERDALE, FL 33305**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

**Volkmar Dirksen 4/11/05 954-561-9900**

**x250**