

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 25, 2007 08:00 A
Secretary of State

DOCUMENT # L02000014966

1. Entity Name
FUTERNICK FAMILY INVESTMENTS, LLC



Principal Place of Business
**10800 NW 97 ST., STE 102
MIAMI, FL 33178**

Mailing Address
**10800 NW 97 ST., STE 102
MIAMI, FL 33178**



04052007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

61-1417809

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**LEVINSON, EDWARD E
407 LINCOLN RD., PH-SE
MIAMI BEACH, FL 33139**

**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 reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

000000729133
05/09/07-80028-016 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	FUTERNICK, LEE
STREET ADDRESS	10800 NW 97 ST., STE 102
CITY-ST-ZIP	MIAMI, FL 33178

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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, OR AUTHORIZED REPRESENTATIVE

4/6/07

Date

305-685-0325

Daytime Phone #