

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 02, 2004 8:00 am
Secretary of State

09-02-2004 90004 024 ****50.00

DOCUMENT # L02000016425

1. Entity Name
T.A.N., LLC



Principal Place of Business
3370 NE 190 STREET
#103
AVENTURA, FL 33180 US

Mailing Address
3370 NE 190 STREET
#103
AVENTURA, FL 33180 US

2. Principal Place of Business
226 NW 6th AVE
Suite, Apt. #, etc.

3. Mailing Address
NATHAN NEUMAN
Suite, Apt. #, etc.
21180 MAIN SAIL CIR B114



07292004 Chg-LLC CR2E083 (10/03)

City & State
HALLANDALE BEACH FL

City & State
AVENTURA FL

4. FEI Number
03-0469518

Applied For
Not Applicable

Zip Country
33009 BROWARD

Zip Country
33180 BROWARD

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DEUTSCH, TOMY
3370 NE 190 STREET
#103
AVENTURA, FL 33180

7. Name and Address of New Registered Agent

Name
NATHAN NEUMAN
Street Address (P.O. Box Number is Not Acceptable)
21180 MAIN SAIL CIR B-114
City
AVENTURA FL Zip Code
33180

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

7/29/2004

Filing Fee Is \$50.00
Due by September 8, 2004

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM ☒ Delete
NAME DEUTSCH, TOMY
STREET ADDRESS 3370 NE 190 STREET, #103
CITY-ST-ZIP AVENTURA, FL 33180

TITLE MGRM ☐ Delete
NAME LASKER, AMRIAM
STREET ADDRESS 115 FOXWOOD DRIVE
CITY-ST-ZIP JERICHO LI, NY 10103

TITLE MGRM ☐ Delete
NAME NEUMAN, NATHAN
STREET ADDRESS 21180 MAIN SAIL CIR B-114
CITY-ST-ZIP AVENTURA, FL 331803510

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE MGRM ☒ Change ☐ Addition
NAME DEUTSCH, TOMY
STREET ADDRESS 20890 NE 30th PLACE
CITY-ST-ZIP AVENTURA FL 33180

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

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

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

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

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

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 606, Florida Statutes.

SIGNATURE:

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

07/29/2004 786-853-0006

7/29/04

PLCS

Date

Daytime Phone #