

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 17, 2007 08:00 A
Secretary of State

DOCUMENT # L02000018706

1. Entity Name
AHBH, LLC



Principal Place of Business
**6499 ENCLAVE WAY
BOCA RATON, FL 33496**

Mailing Address
**6499 ENCLAVE WAY
BOCA RATON, FL 33496**



04122007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 30-0097923	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

**RAYMOND, JOHN J JR
BUTZEL LONG, P.C.
1200 N. FEDERAL HIGHWAY, SUITE 420
BOCA RATON, FL 33432**

**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**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR MARKOWITZ, MARTIN L 6499 ENCLAVE WAY BOCA RATON, FL 33496
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR WASSERMAN, NEIL J 2200 YAMATO RD BOCA RATON, FL 33431
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**DO NOT WRITE
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

Date

Daytime Phone #