2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L02000027219

725 NE 74TH, LLC



FILED Mar 14, 2007 08:00 AM **Secretary of State**

Principal Place of Business

1460 SOUTH OCEAN BOULEVARD MANALAPAN, FL 33462

Mailing Address

1460 SOUTH OCEAN BOULEVARD MANALAPAN, FL 33462



03112007 No Chg-LLC

CR2E083 (11/05)

4. FE! Number 20-0742696 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ROIFF, PAUL 1460 SOUTH OCEAN BOULEVARD

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MANALAF	PAN, FL 33462	IN THIS SPACE
	named entity submits this statement for the purpose of changing its rations of registered agent.	registered office or registered agent, or both, in the State of Fiorida. I am familiar with, and accept
SIGNATURE		Registered Agent signature required when reinstating) DATE
Filing Fee is \$50.00 Due by May 1, 2007		000000666703 03/23/07-80082-007 50.00
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MANAGING MEMBERS/MANAGERS MGR ROIFF, PAUL 1460 SOUTH OCEAN BOULEVARD MANALAPAN, FL 33462	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		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 additate 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 legical per trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PI

INTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE