


# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 10, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L02000027657</b>	
1. Entity Name: 404 NW 4TH AVENUE, LLC	

Principal Place of Business 407 N.W. 4TH AVENUE POMPANO BEACH, FL 33060	Mailing Address 407 N.W. 4TH AVENUE POMPANO BEACH, FL 33060
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04062008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 02-0659527	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  JACKSON, OREDA G 407 N.W. 4TH AVENUE POMPANO BEACH, FL 33060
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GRISHAM, CLARENCE SR 2340 NW 29TH STREET OAKLAND PARK, FL 33311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MINGO, PANSY G 1458 HAZELWOOD TERRACE PLAINFIELD, NJ 07060
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04/22/08-80102-022 138.75

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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:** *Pansy G. Mingo* **4/7/08** **(954)943-8340**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #