# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT # L03000000906

COURAGE & ASSOCIATES, LLC



**FILED** Mar 02, 2007 08:00 AM Secretary of State

Principal Place of Business

**3006 AVIATION AVENUE** 

SUITE 2A

COCONUT GROVE, FL 33133

Mailing Address

3006 AVIATION AVENUE

SUITE 2A

COCONUT GROVE, FL 33133



### DO NOT WRITE IN THIS SPACE

02222007No Cha-LLC	CB2E083 (11/05)	

Applied For 4. FEI Number 73-1697310 Not Applicable \$5.00 Additional

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

FLORIDA CORPORATE SERVICES, LLC. 3006 AVIATION AVENUE SUITE 2A COCONUT GROVE, FL 33133

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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

Signature, typed

ered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

Filing Fee Is \$50.00 Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	PETERSMANN, HANS
STREET ADDRESS	3006 AVIATION AVENUE, SUITE 2A
CITY-ST-ZIP	COCONUT GROVE, FL 33133
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
11 I haraby	certify that the information cumplied with this filling door not qualify for the ex-

U00000653866 03/13/07-80037-016 50.00

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t 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 peoply or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPORTS INTATIVE