## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L03000001940

1. Entity Name 7700 COMPANY, LLC



FILED Feb 15, 2008 08:00 AM Secretary of State

Principal Place of Business

8360 S.W. 108TH STREET MIAMI, FL 33156

TITLE

NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Mailing Address

8360 S.W. 108TH STREET MIAMI, FL 33156

,



02122008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 26-5646305

5. Certificate of Status Desired

\$5.00 Additional Fee Required

Applied For

Not Applicable

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

WALKER, H. WILLIAM JR.
WHITE & CASE LLP
200 S. BISCAYNE BOULEVARD, SUITE 4900
MIAMI, FL 33131

DO	NOT	WRITE
IN	THIS	SPACE

200 S. BISCAYNE BOULEVARD, SUITE 4900 MIAMI, FL 33131		IN T	IN THIS SPACE	
	named entity submits this statement for the purpose of cha ions of registered agent.	nging its registered office or registered agent, or both, i	n the State of Florida. I am familiar with, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE	
After May	! NOW!!! FEE IS \$138.75 / 1, 2008 Fee will be \$538.75		U00000829804 12/26/08-80057-005 138.75	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS  MGRM NICHOLS, D A 8360 SW 108 STREET MIAMI, FL 33156			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS COV. ST. ZIP.	,	DO N	OT WRITE	

## 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 flabifity company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: 305
SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

305-595-5890

2/12/08 Dayline Phone #