

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000006012

FILED  
Jan 17, 2008  
Secretary of State

Entity Name: MORSE LLC

**Current Principal Place of Business:**

7867 NORTH KENDALL DRIVE  
SUITE 105  
MIAMI, FL 33156

**New Principal Place of Business:**

**Current Mailing Address:**

7867 NORTH KENDALL DRIVE  
SUITE 105  
MIAMI, FL 33156

**New Mailing Address:**

FEI Number: 14-1875297

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PINKERT, STEVEN ESQ.  
9130 S. DADELAND BLVD. #1528  
MIAMI, FL 33156 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: SCHWADE, JAMES G  
Address: 10201 SABAL PALM AVENUE  
City-St-Zip: CORAL GABLES, FL 33156

Title: MGRM ( ) Delete  
Name: SCHWADE, KARYN  
Address: 10201 SABAL PALM AVENUE  
City-St-Zip: CORAL GABLES, FL 33156

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: JAMES G. SCHWADE, MD

MGR

01/17/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date