


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 17, 2008 8:00 am
Secretary of State

04-17-2008 90169 030 ***138.75

DOCUMENT # L03000006059	
1. Entity Name THE HARBOR SHOPS, LLC	

Principal Place of Business 221 WEST OAKLAND PARK BLVD. FORT LAUDERDALE, FL 33311	Mailing Address P.O. BOX 950 FORT LAUDERDALE, FL 33302
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

04012008 Chg-LLC CR2E083 (12/06)

4. FEI Number 57-1152716		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent LOOS, JOHN T 1815 CORDOVA ROAD SUITE 210 FORT LAUDERDALE, FL 33316		7. Name and Address of New Registered Agent Name MITCHELL, DON Street Address (P.O. Box Number is Not Acceptable) 221 W. OAKLAND PARK BLVD. City FORT LAUDERDALE, FL 33302 Zip Code 33302	
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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  DATE **4/14/08**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75	Make check payable to: Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR LOOS, JOHN T 1815 CORDOVA ROAD, SUITE 210 FORT LAUDERDALE, FL 33302 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: 	JOHN T. LOOS 4/14/08 (954) 565-8900
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>	<small>Date Daytime Phone #</small>