2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 30, 2008 8:00 am Secretary of State

1. Entity Nam	MENT # L03000014	692						0029 046 ***	
Principal Place 1498 NW 3R DEERFIELD B		Mailing Address 1498 NW 3RD STREET DEERFIELD BEACH, FL	33442			60034	วบฮ		
	w 84h St. #, etc.	3. Mailing Address /388 SW 8. Suite, Apt. #, etc.	In St		04232008	Chg-LLC		R2E083 (12/06)	
City & State	no Beach FL	City & State Be	each F	-6 4	. FEI Num	ber 21716			plied For t Applicable
3306	Country	33069	Brawa	nd 5		te of Status Des	ired 🔲	\$5.00 Add Fee Required	
	6. Name and Address of Current F	Registered Agent		7.	. Name ar	nd Address of I	New Registe	ered Agent	
HERSHKOWITZ BALL									
					(P.O. Box Number is Not Acceptable) Sw 874 St				
BEERINEE	DENOMPL COME								
			City	m Da n	a Bee	zeh		FL 45/38	069
8. The above named equity 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.	X//-C//-					7/.	28/08	· · · · · · · · · · · · · · · · · · ·	
	Signature, typed or printed name of registered agent a	nd title if applicable. (NUTE	Registered Agent signa	ture required whe	n reinstating)	т	, ,	JAIE .	
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75						F		ck payable to artment of State	•
9.	MANAGING MEMBE	RS/MANAGERS	10.			ADDIT	IONS/CHAN	NGES	
TITLE	MGRM	☐ Delete	TITLE					☐ Change	☐ Addition
NAME	HERSHKOWITZ, PAUL		NAME			0.12 4			
STREET ADDRESS	4408 NW 3RD STREET		STREET ADDRESS	1388	SW	84h St Beach		- 04: 1	2
CITY-ST-ZIP	DEERFIELD BEACH, FL 88442		CITY-ST-ZIP	toma	000	Seach	FL	3306	7
TITLE		Delete	TITLE					Change	Addition
NAME			NAME						
STREET ADDRESS Crty+St-Zip		•	STREET ADDRESS CITY+ST-ZIP						
· · · · ·							·	Change	Addition
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STREET ADDRESS			STREET ADDRESS						
CITY-ST-ZIP			CITY-ST-ZIP						
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.									