## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

Mailing Address

SUITE 200

11555 HERON BAY BLVD.

CORAL SPRINGS, FL 33076

DOCUMENT # L03000015754 1. Entity Name BOCA HARBOUR 800, LLC

US

Principal Place of Business

11555 HERON BAY BLVD.

CORAL SPRINGS, FL 33076

WAROFF, MICHAEL G 11555 HERON BAY BLVD.

CORAL SPRINGS, FL 33076

SUITE 200



US

## FILED Apr 16, 2007 08:00 A Secretary of State

CR2E083 (11/05)



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

4. FEI Number 55-0828985

lumber 0828985

5. Certificate of Status Desired

04102007 No Chg-LLC

Not Applicable \$5.00 Additional Fee Required

Applied For

## DO NOT WRITE IN THIS SPACE

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:

SUITE 200

	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Rogistereu Agent signaturu raquired when reinstating) DATE
Filing Fee is \$50.00 Due by May 1, 2007		U00000708635 04/24/07-80124-002 50.00
9.	MANAGING MEMBERS/MANAGERS	
NAME	MGRM RAMELLE, LLC 11555 HERON BAY BLVD., SUITE 200 CORAL SPRINGS, FL 33076	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		DO NOT WRITE
THTLE NAME STREET ADDRESS CITY - ST - ZIP		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
indicated	on this report is true and accurate and that my signature sl	qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information that have the same legal effect as if made under oath, that I am a managing member or manager of the scute this report as required by Chapter 608, Florida Statutes.

SIGNATURE AND TYPED OR POINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #