## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000020665

1. Entity Name

6240 N.E. 4TH CT., LLC



Principal Place of Business

6240 N.E. 4TH CT. MIAMI, FL 33138 Mailing Address

901 NE 125TH STREET, SUITE 101

MIAMI, FL 33161

## FILED Apr 21, 2008 08:00 A Secretary of State



03192008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 43-2021259 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

PATERNOSTRO, JOSEPH 901 N.E. 125TH STREET, SUITE #101 NORTH MIAMI, FL 33161 DO NOT WRITE

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 lamiliar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE, Registered Agent signature required when reinstating)

ATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

000000908727 05/06/08-80039-024 138.75

MANAGING MEMBERS/MANAGERS 9. MGRM TITLE NAME TAYLOR, WAYNE E 10151 NE 14TH AVENUE STREET ADDRESS CiTY-ST-ZIP MIAMI, FL 33138 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP

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

SIGNATURE: Wayne Jaylor

3/25/08 305-573-9988

Daytime Phone