2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED Apr 26, 2007 08:00 AM Secretary of State

1. Entity Name HOVER LURE, LLC



Principal Place of Business

Mailing Address

4550 NORTH DIXIE HWY. FORT LAUDERDALE, FL 33334 4550 NORTH DIXIE HWY. FORT LAUDERDALE, FL 33334



04182007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-0088894 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

STORELLI, JOHN 631 NE 18TH AVE FORT LAUDERDALE, FL 33304

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tue opli	gations of registered agent.	
SIGNATUE		
28.6.7.2	Signature, types of protein page of registered agent and title if applicable.	ed Agent signature recursed when remetating), many transfer to the property of
	Filing Fee is \$50.00 Due by May 1, 2007	
9.	MANAGING MEMBERS/MANAGERS	, -
		- -
TITLE	MGRM	
MAME	STORELLIOHN	

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

STREET ADDRESS | 631 NE 18TH AVE. CITY-ST-ZIP FORT LAUDERDALE, FL 33304 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITI F NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP

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05/09/07-80108-017 50.00

11. I hereby certify that the information supplied with this filling 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:

BIGNATURE AND TYPED OR PRINTED AME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #