2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000027352

1. Entity Name

EFFICIENT BUSINESS ENVIRONMENTS, LLC



FILED Mar 02, 2007 08:00 AM **Secretary of State**

Principal Place of Business

C/O STJ HOLDINGS LTD. 6530 WEST ROGERS CIRCLE, STE. #31 BOCA RATON, FL 33487

Mailing Address

C/O STJ HOLDINGS LTD. 6530 WEST ROGERS CIRCLE, STE. #31 BOCA RATON, FL 33487



01222007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-0118114 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HASNER, MARK M ESQ SUNTRUST INTERNATIONAL CENTER ONE S.E. 3RD AVENUE, STE. 2400 MIAMI, FL 33131

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 I he above named entity submits this statement for the purpose of cha the obligations of registered agent. 	inging its registered office or registered agent, or both, in the	State of Florida. I am familiar with, and accept
Signature, typed or printed name of registered agent and trile if applicable	(NOTE: Registered Agent signature required when renstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2007		

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME	MGR LEDER, SEAN M
STREET ADDRESS CITY-ST-ZIP	6530 W. ROGERS CIRCLE #31 BOCA RATON, FL 33487
TITLE NAME STREET ADDRESS CITY-SI-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CHY-ST-ZIP	
11. I hereby o	sertify that the information supplied with this filling does not qualify for the ex-

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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:

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