2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000027396

1. Entity Name NE-BA, LLC.



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

Principal Place of Business

4000 N. FEDERAL HWY, STE. 206 BOCA RATON, FL 33431 Mailing Address

1000 OMNI BLVD. NEWPORT NEWS, VA 23606



04202007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1440955	Applied For
20-1440955	Not Applicable
5. Certificate of Status Desired	\$5.00 Additional

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MACLAREN, LINDA O 798 SOUTH FEDERAL HWY., STE. 100 BOCA RATON, FL 33432

DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the purpose of char tions of registered agent.	nging its registered office or registered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Ci-		
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
Fi D	iling Fee is \$50.00 ue by May 1, 2007		
9.	MANAGING MEMBERS/MANAGERS		
TÜLE	MGRM		
NAME	ECONOMOS, NICHOLAS		
STREET ADDRESS	4000 N FEDERAL HWY STE 206		
CITY-ST-ZIP	BOCA RATON, FL 33431		
TITLE			
NAME		ľ	
STREET ADDRESS			U00000735688
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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 poetiver or trustee empowered to precute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Comment

STREET ADDRESS CITY-ST-ZIP

NICK ECONOMOS

04/25/2007

(757) 591-3519

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

Date

Daytime Phone ≠