2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

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

DOCUMENT # L03000028744

1. Entity Name
NOTE BY NOTE LLC

FILED Apr 05, 2007 08:00 A Secretary of State

Principal Place of Business

2530 EAGLE RUN CIRCLE WESTON, FL 33327

Mailing Address

2530 EAGLE RUN CIRCLE WESTON, FL 33327



03102007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 73-1675659 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CREMISINI, TULIO F 2530 EAGLE RUN CIRCLE WESTON, FL 33327

SIGNATURE:

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413107

Date

954 3493140

Daytime Phone #

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, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
Filing Foo is \$50.00 Due by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS	•	
TITLE NAME STREET ADDRESS CITY-S1-ZIP	MGR CREMISINI, TULIO F 2530 EAGLE RUN CIRCLE WESTON, FL 33327		U00000691062 04/12/07-80015-022 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CREMISINI, ELENA 2530 EAGLE RUN CIRCLE WESTON, FL 33327		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN '	THIS SPACE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			
11. I hereby certify that the information supplied with this (iling 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 cath; 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.			