2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jan 25, 2007 8:00 am Secretary of State

Date

Daytime Phone #

DOCU 1. Entity Nam 1445 HOI	10	# L030000338	353				01-25-2007 90089 046 ****50.00				
Principal Plac 1445 SW 21 FT. LAUDERD	ST AVENUE		Mailing Address 1445 SW 21ST AVENUE FT. LAUDERDALE, FL 33312		US		, 	<u>.</u> III coico in eo isso isso o		(T) 111 1889	
2. Principal P	lace of Busin	ness - No P.O. Box #	3. Mailing Address								
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			01082007	Chg-LLC	CR2E083 (12/	06)		
City & State	е		City & State			4. FEI Numl 41-21			_	olied For Applicable	
Zip	Country		Zip Count		try	5. Certificate of Status Desired Fee Required					
	6. Name	and Address of Current R	legistered Agent		7. Name and Address of New Registered Agent Name						
DAMMYER	R. DANIEL	L CPA		Steven Siems							
	T SUNRIS	SE BLVD., SUITE 216	_		Street Address	(P.O. Box Numl 412 Nas	ber is Not Acceptable sau Lane	e)			
					City Fr +	Ft Lauderdale FL Zin Code 33312				1 2	
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 the obligations of registered agent.											
SIGNATURE Signature. Typed or printed name of registered agent and bitle if applicable. (NOTE: Registered Agent signature required when remistating) DATE DATE											
Filing Fee is \$50.00 Due by May 1, 2007							1	e check payable a Department of			
9.		MANAGING MEMBER	RS/MANAGERS	10.			ADDITIONS	/CHANGES			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	3011 S.W	I. KENNETH /. 47 STREET DERDALE, FL 33312	☐ Delete					☐ Cha	nge	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	l	TEVEN L SSAU LANE UDERDALE, FL 33312	☐ Defete					□ Cha	inge	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAM STRE				☐ Cha	nge	Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete					☐ Cha	nge	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	outific that the	o information approliced with	Delete	CITY	E Et address - St-Zip	d in Observe 440	D. Florida Chabara I f	☐ Cha		Addition	
11. I hereby certify that the information samplied 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 a execute this report as required by Chapter 608, Florida Statutes.											