2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L03000035222

1. Entity Name
6232 HANCOCK ROAD, L.L.C.

Principal Place of Business	Mailing Address
12323 S.W. 55TH STREET BUILDING 1000, SUITE1010 FORT LAUDERDALE, FL 33330	12323 S.W. 55TH STREET BUILDING 1000, SUITE1010 FORT LAUDERDALE, FL 33330

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04062007 No Chg-LLC   CR2E083 (11/05)

4. FEI Number		Applied For
20-0275105		Not Applicable

5. Certificate of Status Desired   ☒ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

FINK, BRIAN
2600 DOUGLAS RD
SUITE 1109
CORAL GABLES, FL 33134

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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 Fee is $50.00
Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	ADRIANI, MARIO
STREET ADDRESS	12323 S.W. 55TH STREET , SUITE1010
CITY-ST-ZIP	FT. LAUDERDALE, FL 33330
TITLE	MGRM
NAME	ADRIANI, CHRISTINE L
STREET ADDRESS	12323 S.W. 55TH STREET, SUITE 1010
CITY-ST-ZIP	FT LAUDERDALE, FL 33330
TITLE	
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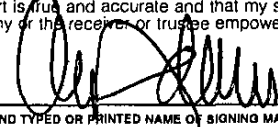
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature 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: _Christino Adrian_   4-24-07   954-252-9989

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #