

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 19, 2007 08:00 AM
Secretary of State

DOCUMENT # L03000039262

1. Entity Name
2436 EAST LAS OLAS BLVD. STORES, LLC



Principal Place of Business
**2 MATTOON RD.
WATERBURY, CT 06722**

Mailing Address
**P.O. BOX 1910
WATERBURY, CT 06722**



01092007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2357182	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**VITALE, TERRY
340 SUNSET DRIVE #1002
FT. LAUDERDALE, FL 33301**

**DO NOT WRITE
IN THIS SPACE**

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 renouncing) DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

U000000593364
01/22/07-80028-017 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DEVINO, KENNETH M 33 NORTH FORTY ROAD WOODBURY, CT 067982619
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR VITALE, TERRY 340 SUNSET DRIVE, #1002 FT. LAUDERDALE, FL 33301
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IN THIS SPACE**

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

1/9/07 203 754 5282
Date Daytime Phone #