## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 18, 2007 08:00 AM
Secretary of State

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1. Entity Name
MARGARITAVICH LLC



Principal Place of Business

C/O CINDY THOMPSON 424 A FLEMING STREET KEY WEST, FL 33040 Mailing Address

C/O GELFAND, RENNERT, & FELDMAN 1880 CENTURY PARK E, #1600 LOS ANGELES. CA 90067



## DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0334780

Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HAFT, STUART J ESQ 340 ROYAL POINCIANA WAY, STE 321 PALM BEACH, FL 33480

## DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of char the obligations of registered agent.	nging its registered office or registered agent, or both, in the	State of Florida. I am familiar with, and accept
SIGNATURE	(NOTE: Registered Agent signature /equired when reinstating)	DATE
Filing Fee is \$50.00		

Due by May 1, 2007

MANAGING MEMBERS/MANAGERS TITLE MGRM BUFFET, JAMES W NAME 256 WORTH AVE., STE. Q STREET ADDRESS CITY-ST-ZIP PALM BEACH, FL 33480 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP

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## DO NOT WRITE IN THIS SPACE

11. I nereby 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

1/10/4

Daytime Phone #