

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 18, 2008 08:00 AM
Secretary of State

DOCUMENT # L03000042107	
1. Entity Name 90 LLC	
Principal Place of Business 5410 NORTH BAY ROAD MIAMI BEACH, FL 33140	Mailing Address 5410 NORTH BAY ROAD MIAMI BEACH, FL 33140



03272008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 16-1688865	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

LEWIS, HAROLD L
ONE BISCAYNE TOWER, SUITE 2400
2 SOUTH BISCAYNE BLVD.
MIAMI, FL 33131

**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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

000000906545
05/05/08-80002-019 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRP
NAME	FERRARI TOBIN, CHRISTINE
STREET ADDRESS	5410 N BAY RD
CITY- ST- ZIP	MIAMI BEACH, FL 33140
TITLE	MGRV
NAME	BOSA, JOHN W
STREET ADDRESS	2400 MAGNOLIA DRIVE
CITY- ST- ZIP	MIAMI, FL 33181
TITLE	MGR
NAME	KUMEROW, ERIC
STREET ADDRESS	736 FAIRVIEW LANE
CITY- ST- ZIP	BARTLETT, IL 60103
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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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

Date

Daytime Phone #