2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000042860

1. Entity Name

PHILLY IN MIAMI - SOUTH BEACH, LLC



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

Principal Place of Business

1059 COLLINS AVENUE SUITE #204

MIAMI BEACH, FL 33139

Mailing Address

7610 SOUTHWEST 82ND STREET

APT. #J208 MIAMI, FL 33143



01142007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-0363272

Applied For Not Applicable

5. Certificate of Status Desired

X

\$5.00 Additional Fee Required

305-538-5824

Daytime Phone #

6. Name and Address of Current Registered Agent

DAMOND, NEELY 1059 COLLINS AVENUE SUITE #204 MIAMI BEACH, FL 33139

SIGNATURE: _

DO NOT WRITE IN THIS SPACE

 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 NAME STREET ADDRESS CITY-ST-ZIP	MGR DAMOND, NEELY 1059 COLLINS AVENUE MIAMI BEACH, FL 33139		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			000000594265 01/22/07-80064-011 55.00
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TITLE MAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE
NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
11. I hereby certify that the information supplied with this filling 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 employered to execute this report as required by Chapter 608, Florida Statutes.			