

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000051163

Entity Name: 1300 MOFFETT LLC

FILED  
Jul 03, 2006  
Secretary of State

**Current Principal Place of Business:**

1300 MOFFETT ST  
HOLLYWOOD, FL 33009

**New Principal Place of Business:**

**Current Mailing Address:**

16766 SW 51 STREET  
MIRAMAR, FL 330274917 US

**New Mailing Address:**

FEI Number: 83-0378369      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

KONG, LIN  
16766 SW 51 STREET  
MIRAMAR, FL 330274917 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: KONG, LIN  
Address: 16766 SW 51 ST  
City-St-Zip: MIRAMAR, FL 330274917

Title: MGRM ( ) Delete  
Name: HUO, ZHIFENG  
Address: 16766 SW 51 STREET  
City-St-Zip: MIRAMAR, FL 330274917 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM (X) Change ( ) Addition  
Name: HUO, ZHIFENG  
Address: 16766 SW 51 STREET  
City-St-Zip: MIRAMAR, FL 33027 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: LIN KONG

MGRM

07/03/2006

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date