

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**May 16, 2007 8:00 am**  
**Secretary of State**

05-16-2007 90174 018 \*\*\*\*50.00

DOCUMENT # L04000009635

1. Entity Name  
1414 PROPERTY, LLC



Principal Place of Business

1414 N.W. 107TH AVE  
MIAMI, FL 33172

Mailing Address

35-56 160 STREET  
FLUSHING, NY 11358

40115135



04202007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
20-0689228

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

PETRUCCELLI, ANTONIO  
1414 NW 107TH AVE SUITE 302  
MIAMI, FL 33172

1414 NW 107th  
Ave.  
33172 STE. 302

**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 reinstating)

DATE

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

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM  
NAME PETRUCCELLI, ANTONIO  
STREET ADDRESS 1414 NW 107TH AVE SUITE 302  
CITY-ST-ZIP MIAMI, FL 33172

TITLE MGRM  
NAME GUGLIOTTA, GAETANO  
STREET ADDRESS 133-20 WHITESTONE EXPRESSWAY  
CITY-ST-ZIP FLUSHING, NY 11354

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
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: *X Antonio Petrucelli*

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

4/28/07

Date

Daytime Phone #