

FILED
Mar 12, 2008 8:00 am
Secretary of State

02-14-2008 90072 034 ***138.75

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L04000012231			
1. Entity Name SABINA INVESTMENT GROUP, LLC			
Principal Place of Business 1200 S. ROGERS CIRCLE, UNIT #11 BOCA RATON, FL 33487	Mailing Address 1200 S. ROGERS CIRCLE, UNIT #11 BOCA RATON, FL 33487		
DO NOT WRITE IN THIS SPACE		30001827	
			
		01072008 No Chg-LLC CR2E083 (12/07)	
		4. FEI Number 20-0850089	Applied For Not Applicable
		5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required
6. Name and Address of Current Registered Agent SANDBERG, DONNA M 1200 S ROGERS CIRCLE, #11 BOCA RATON, FL 33487		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 <u>Donna M. Sandberg</u> DATE <u>3-10-08</u> 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			
9. MANAGING MEMBERS/MANAGERS		DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ALBANESE, LEONARD 1200 SOUTH ROGERS CIRCLE UNIT #11 BOCA RATON, FL 33487		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WEISS, MARK 5151 FISCHER ISLAND DRIVE FISCHER ISLAND, FL 33109		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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: <u>LEONARD ALBANESE, Manager, 1/31/08</u> 561-994-1375 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #			