

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 19, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # L04000021244**

1. Entity Name  
PROPERTIES EXPO, L.L.C.



Principal Place of Business  
3409 NE 169TH ST  
NORTH MIAMI BEACH, FL 33160

Mailing Address  
3409 NE 169TH ST  
NORTH MIAMI BEACH, FL 33160



03072007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
20-0913283

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

SHAPIRO, IRA R  
16375 NE 18TH AVE, #225  
NORTH MIAMI BEACH, FL 33162

**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**

000000671783  
03/28/07-80042-021 50.00

**9. MANAGING MEMBERS/MANAGERS**

TITLE	MGRM
NAME	BENNISSAW, MEIR
STREET ADDRESS	3409 NE 169TH STREET
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33160

TITLE	
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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

Meir Ben Nissan

Date

Daytime Phone #

3/14/07 X 305 915-5015