

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 13, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000025645

1. Entity Name
KATZ & PREVOR LLC



Principal Place of Business
**800 SOUTH OCEAN BLVD.
UNIT 404
BOCA RATON, FL 33432**

Mailing Address
**800 SOUTH OCEAN BLVD.
UNIT 404
BOCA RATON, FL 33432**



01052006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0952150

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**PREVOR, MICHAEL
800 SOUTH OCEAN BLVD.
UNIT 404
BOCA RATON, FL 33432**

**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, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	PREVOR, MICHAEL
STREET ADDRESS	800 SOUTH OCEAN BLVD., UNIT 404
CITY-ST-ZIP	BOCA RATON, FL 334326366
TITLE	MGMR
NAME	KATZ, LEWIS
STREET ADDRESS	800 SOUTH OCEAN BLVD., UNIT 504
CITY-ST-ZIP	BOCA RATON, FL 334326366
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000385880
01/18/06-80034-025 50.00

**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: *Michael Prevor* **MICHAEL PREVOR**

1/10/06 **561-892 1202**

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

Date

Daytime Phone #