

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000032684

Entity Name: BROKENREMOTE, LLC

FILED  
Aug 31, 2007  
Secretary of State

**Current Principal Place of Business:**

5821 NW 25 TERRACE  
BOCA RATON, FL 33496

**New Principal Place of Business:**

**Current Mailing Address:**

5821 NW 25 TERRACE  
BOCA RATON, FL 33496

**New Mailing Address:**

FEI Number: 20-1076064      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:**

NELSON, HARVEY  
5821 NW 25 TERRACE  
BOCA RATON, FL 33496      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: MGR      ( ) Delete  
Name: AUBEL, DAVID J  
Address: 4000 HOLLYWOOD BLVD., SUITE 435 SO.  
City-St-Zip: HOLLYWOOD, FL 33021

Title: MGR      ( ) Delete  
Name: NELSON, JUSTIN  
Address: 5821 NW 25 TERRACE  
City-St-Zip: BOCA RATON, FL 33496

Title: MGR      ( ) Delete  
Name: NELSON, HARVEY  
Address: 5821 NW 25 TERRACE  
City-St-Zip: BOCA RATON, FL 33496

**ADDITIONS/CHANGES:**

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: HARVEY NELSON

MGR

08/31/2007

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