2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 14, 2007 08:00 AM
Secretary of State

DOCUMENT # L04000036756

1. Entity Name
WEB10, LLC

Principal Place of Business	Mailing Address
3550 NORTH MIAMI AVENUE MIAMI, FL 33127	3550 NORTH MIAMI AVENUE MIAMI, FL 33127

DO NOT WRITE IN THIS SPACE

02102007 No Chg-LLC CR2E083 (11/05)

4. FEI Number
51-0536049
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

STEINBAUM, SARAH
44 WEST FLAGLER STREET, SUITE 2175
MIAMI, FL 33130

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	STEINBAUM, BERNICE
STREET ADDRESS	3550 NORTH MIAMI AVENUE
CITY-ST-ZIP	MIAMI, FL 33127
TITLE	MGRM
NAME	STEINBAUM, SARAH
STREET ADDRESS	44 WEST FLAGLER STREET, SUITE 2175
CITY-ST-ZIP	MIAMI, FL 33130
TITLE	MGRM
NAME	LANSTER, STEVEN M
STREET ADDRESS	7399 CORAL WAY
CITY-ST-ZIP	MIAMI, FL 33155
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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02/23/07-80039-018 55.00

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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 Date Daytime Phone #