

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 18, 2008 08:00 A
Secretary of State

DOCUMENT # L04000036756 1. Entity Name WEB10, LLC	
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Principal Place of Business 3550 NORTH MIAMI AVENUE MIAMI, FL 33127	Mailing Address 3550 NORTH MIAMI AVENUE MIAMI, FL 33127
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04162008No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

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

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

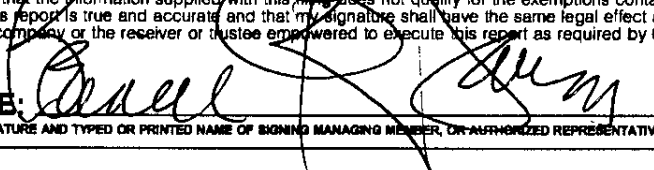
FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U000000906728
05/05/08-80010-002 138.75

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

**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:  _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #