


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

5/4

FILED
May 31, 2005 8:00 am
Secretary of State

05-04-2005 90044 019 ****50.00

DOCUMENT # L04000043606		
1. Entity Name 767 BUILDING, LLC		

Principal Place of Business 777 S STATE ROAD 7 MARGATE, FL 33068	Mailing Address 777 S STATE ROAD 7 MARGATE, FL 33068
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30008178



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

04222005 Chg-LLC CR2E083 (10/03)

4. FEI Number
04-3802560

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent 777 PROPERTIES, INC. 777 S. STATE ROAD 7 MARGATE, FL 33068	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

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 reappointing) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2005**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM 777 PROPERTIES, INC. 777 S STATE ROAD 7 MARGATE, FL 33068 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:  **4/27/05 954-969-2451**
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #
MICHAEL SHOOSTER, President