

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000052579

Entity Name: OBEBOBE SOUTH LLC

**FILED**  
**Jul 01, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

287 KING STREET  
CHAPPAQUA, NY 10514 US

**New Principal Place of Business:**

**Current Mailing Address:**

287 KING STREET  
CHAPPAQUA, NY 10514 US

**New Mailing Address:**

FEI Number: 20-2260632      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:**

**Name and Address of New Registered Agent:**

SCALA, NORMA  
1170 NORTH FEDERAL HIGHWAY  
APT. 704  
FORT LAUDERDALE, FL 33304 US

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: MGRM ( ) Delete  
Name: OBERFEST, BRUCE  
Address: 287 KING STREET  
City-St-Zip: CHAPPAQUA, NY 10514 US

**ADDITIONS/CHANGES:**

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

I hereby certify that the information supplied with this filing does not qualify for the 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: BRUCE OBERFEST

MGRM

07/01/2006

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