

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000057903

Entity Name: 18TH AVENUE, LLC

FILED
Feb 20, 2007
Secretary of State

Current Principal Place of Business:

5308 CHIQUITA BLVD S.
APT 102 A
CAPE CORAL, FL 33914 US

Current Mailing Address:

5308 CHIQUITA BLVD S.
APT 102 A
CAPE CORAL, FL 33914 US

New Principal Place of Business:

5308 CHIQUITA BLVD S.
APT 102-A
CAPE CORAL, FL 33914 US

New Mailing Address:

5308 CHIQUITA BLVD S.
APT 102-A
CAPE CORAL, FL 33914 US

FEI Number: 20-1459239

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KYLE, KEVIN A
1380 ROYAL PALM SQUARE BLVD.
FORT MYERS, FL 33919 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: GIORDANO, ANTHONY
Address: 5308 CHIQUITA BLVD. S. APT. 102-A
City-St-Zip: CAPE CORAL, FL 33914 US

Title: MGR () Delete
Name: SCALA, M.D., LOUIS J
Address: 5308 CHIQUITA BLVD. S. APT. 102-A
City-St-Zip: CAPE CORAL, FL 33914 US

ADDITIONS/CHANGES:

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 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: ANTHONY GIORDANO

MGR

02/20/2007

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