

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000063656

FILED
Apr 24, 2007
Secretary of State

Entity Name: BURCH WAREHOUSES, L.L.C.

Current Principal Place of Business:

13945 CARTEE ROAD
MIAMI, FL 33158

New Principal Place of Business:

Current Mailing Address:

13945 CARTEE ROAD
MIAMI, FL 33158

New Mailing Address:

FEI Number: 34-2014889

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURCHELL, MICHAEL
13945 CARTEE ROAD
MIAMI, FL 33158 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: MGRM () Delete
Name: BURCHELL, MICHAEL
Address: 13945 CARTEE ROAD
City-St-Zip: MIAMI, FL 33158

Title: MGR () Delete
Name: BURCHELL, WARREN G
Address: 5400 SW 63 AVE
City-St-Zip: MIAMI, FL 33155

Title: MGR () Delete
Name: BURCHELL, LILLIAN J
Address: 5400 SW 63 AVE
City-St-Zip: MIAMI, FL 33155

Title: MGR () Delete
Name: BURCHELL, CHERYL T
Address: 13945 CARTEER ROAD
City-St-Zip: MIAMI, FL 33158

ADDITIONS/CHANGES:

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

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

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: MICHAEL BURCHELL

MGRM

04/24/2007

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