

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000069850

1. Entity Name  
ARY MOISE LLC



FILED

2007 SEP 17 AM 9:34

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
5910 N.E. 6TH COURT  
MIAMI, FL 33137

Mailing Address  
5910 N.E. 6TH COURT  
MIAMI, FL 33137



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

07242007 Chg-LLC CR2E083 (12/06)

4. FEI Number  
APPLIED FOR

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATE CREATIONS NETWORK INC  
11380 PROSPERITY FARMS ROAD, #221E  
PALM BEACH GARDENS, FL 33410

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

Signature, typed or printed name of registered agent and date, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00  
Due by September 14, 2007

Make check payable to  
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGR  
MOISE, ARY  
5910 N.E. 6TH COURT  
MIAMI, FL 33137 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
900109871229  
09/25/07--01008--012 \*\*\*500.00 ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

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]* 9/13/07

9/19  
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