2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000070212

1940 HARRISON, LLC



Principal Place of Business

4700 NW BOCA RATON BLVD

SUITE 104

BOCA RATON, FL 33431-4860

Mailing Address

4700 NW BOCA RATON BLVD

BOCA RATON, FL 33431-4860

FILED Apr 16, 2007 8:00 am Secretary of State

04-16-2007 90340 040 ****55.00

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01082007 No Chg-LLC

CR2E083 (11/05)

Fee Required

Applied For 4. FEI Number 20-1820115 Not Applicable \$5.00 Additional 5. Certificate of Status Desired

6. Name and Address of Current Registered Agent

MOSKIN, SIDNEY M

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	BOCA RATAN BLVD TON, FL 33431-4860	IN THIS SPACE	
the obligat	tions of registered agent.	nging its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept	_
SIGNATURE.	Signature, typed or printed name of registered agent and title it applicable.	(NOTE: Registered Agent signature required when reinstating) DATE	
F	iling Fee Is \$50.00 ue by May 1, 2007		
9.	MANAGING MEMBERS/MANAGERS		_
NAME STREET ADDRESS CITY-ST-ZIP	MOSKIN, SIDNEY M 17735 FIELDBROOK CIRCLE N BOCA RATON, FL 334961534		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS			

11. I hereby certify that the information subplied 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:

CITY+ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Stony m

561-291.5502 Daytime Phone #