

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000071249

Entity Name: DELIN15901 LLC

FILED  
Aug 24, 2007  
Secretary of State

**Current Principal Place of Business:**

15979 BISCAYNE BOULEVARD  
AVANTI CENTER  
NORTH MIAMI BEACH, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

15979 BISCAYNE BLVD  
AVANTI CENTER  
NORTH MIAMI BEACH, FL 33160

**New Mailing Address:**

FEI Number: 20-1708201      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:**

DIBONO, DEBRA  
3670 NE 201ST STREET  
COUNTRY CLUB ESTATES  
AVENTURA, FL 33180 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: PRES ( ) Delete  
Name: CHODOROW, LINDA  
Address: 3670 NE 201ST STREET  
City-St-Zip: AVENTURA, FL 33180

Title: VP ( ) Delete  
Name: DIBONO, DEBRA  
Address: 3670 NE 201ST STREET  
City-St-Zip: AVENTURA, FL 33180

**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 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: DEBRA DIBONO

VP

08/24/2007

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