

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000071617

Entity Name: EVAN B. PLOTKA, PLLC

FILED
Apr 04, 2008
Secretary of State

Current Principal Place of Business:

7771 W. OAKLAND PK BLVD
SUITE 140
SUNRISE, FL 33351

New Principal Place of Business:

210 NORTH UNIVERSITY DRIVE
EXECUTIVE TOWER SUITE 301
CORAL SPRINGS, FL 33071

Current Mailing Address:

7771 W. OAKLAND PARK BOULEVARD
SUITE 140
SUNRISE, FL 33351

New Mailing Address:

210 NORTH UNIVERSITY DRIVE
EXECUTIVE TOWER SUITE 301
CORAL SPRINGS, FL 33071

FEI Number: 81-0656437

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PLOTKA, EVAN B
7771 W. OAKLAND PARK BLVD
ATRIUM WEST SUITE 140
SUNRISE, FL 33351 US

Name and Address of New Registered Agent:

PLOTKA, EVAN B
210 NORTH UNIVERSITY DRIVE
EXECUTIVE TOWER SUITE 301
CORAL SPRINGS, FL 33071 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: EVAN B. PLOTKA

04/04/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PLOTKA, EVAN B
Address: 7771 W. OAKLAND PARK BLVD SUITE 140
City-St-Zip: SUNRISE, FL 33351

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PLOTKA, EVAN B
Address: 210 NORTH UNIVERSITY DRIVE, SUITE 301
City-St-Zip: CORAL SPRINGS, FL 33071

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: EVAN B. PLOTKA

MGR

04/04/2008

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