


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 11, 2007 08:00 AM
Secretary of State

DOCUMENT # L04000087742		
1. Entity Name AHEAD OF THE CURVE, LLC		
Principal Place of Business 185 NW SPANISH RIVER BLVD. STE 204 BOCA RATON, FL 33431 US	Mailing Address 185 NW SPANISH RIVER BLVD. STE 204 BOCA RATON, FL 33431 US	
DO NOT WRITE IN THIS SPACE		01082007No Chg-LLC CR2E083 (11/05)
		4. FEI Number 20-1974540 Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required
6. Name and Address of Current Registered Agent FDR, LLC 185 NW SPANISH RIVER BLVD. STE 210 BOCA RATON, FL 33431		DO NOT WRITE IN THIS SPACE
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
Filing Fee is \$50.00 Due by May 1, 2007		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM JR, LLC 11602 LOSANO DR. BOYNTON BEACH, FL 33437	<p>000000581683 01/11/07-80001-014 50.00</p> DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FDR, LLC 3598 S OCEAN BLVD. #105 HIGHLAND BEACH, FL 33487	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM M AND M CONSULTANTS, LLC 4877 N. CLASSICAL BLVD. DELRAY BEACH, FL 33431	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ALL ISLAND MANAGEMENT, LLC 1101 STEWART AVE GARDEN CITY, NY 11530	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KIR ENTERTAINMENT, LLC 145 E 16TH STREET APT 9C NEW YORK, NY 10003	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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: <u>Fred H. Hersh</u>		1/6/07
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		<small>Date</small> <small>Daytime Phone #</small>