

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L04000089176

1. Entity Name
JAPPAH MANAGEMENT LC



Principal Place of Business
9155 SO. DADELAND BLVD.
SUITE 1602
MIAMI, FL 33156

Mailing Address
9155 SO. DADELAND BLVD.
SUITE 1602
MIAMI, FL 33156

FILED

2007 APR 23 AM 10:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01092007 No Chg-LLC

CR2E083 (11/05)

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4. FEI Number
20-2056249

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

KUBIT, DONALD ESQ.
1395 BRICKELL AVENUE
14TH FLOOR
MIAMI, FL 33131

**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 _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
ZAHN, PHILIPP J
C/O 9155 SO. DADELAND BLVD., STE. 1602
MIAMI, FL 33156

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
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TITLE
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CITY-ST-ZIP

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05/08/07--01023--007 **550.00

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IN THIS SPACE**

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

Date

Daytime Phone #

April 2, 07 305-278-8400