

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2007 8:00 am
Secretary of State

04-26-2007 90026 040 ****50.00

DOCUMENT # L05000001531

1. Entity Name
MILLENNIUM DEVELOPMENT ENTERPRISES, LLC



Principal Place of Business
2500 E. HALLANDALE BEACH BLVD.
HALLANDALE BEACH, FL 33009

Mailing Address
2500 E. HALLANDALE BEACH BLVD.
HALLANDALE BEACH, FL 33009

60040761



2. Principal Place of Business - No P.O. Box #

2500 E. HALLANDALE BEACH BLVD

3. Mailing Address

2500 E. HALLANDALE BEACH BLVD

Suite, Apt. #, etc.

SUITE "T"

Suite, Apt. #, etc.

SUITE "T"

02262007

Chg-LLC

CR2E083 (12/06)

City & State

HALLANDALE BEACH, FL

City & State

HALLANDALE BEACH, FL

4. FEI Number

20-2111581

Applied For

Not Applicable

Zip

33009

Country

Zip

33009

Country

5. Certificate of Status Desired ☐

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

LEGAL INFORMATION SERVICES, INC.
2300 WESTON ROAD, STE 404
WESTON, FL 33331

7. Name and Address of New Registered Agent

Name
ROZENCWAIG, NADEL & FERRERO-CARR
Street Address (P.O. Box Number is Not Acceptable)

301 W. HALLANDALE BEACH BLVD.

City HALLANDALE BEACH

FL

Zip Code
33009

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**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE MGR ☐ Delete
NAME MARTINEZ, IGNACIO
STREET ADDRESS 2800 WESTON ROAD SUITE 204
CITY-ST-ZIP WESTON, FL 33331

TITLE MGR ☐ Delete
NAME EPELBOIM, NOEL
STREET ADDRESS 2800 WESTON ROAD SUITE 204
CITY-ST-ZIP WESTON, FL 33331

TITLE MGR ☐ Delete
NAME ROMASH, RICK
STREET ADDRESS 2800 WESTON ROAD SUITE 204
CITY-ST-ZIP WESTON, FL 33331

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE MGR ☒ Change ☐ Addition
NAME MARTINEZ, IGNACIO
STREET ADDRESS 2500 E. HALLANDALE BEACH BLVD, SUITE T
CITY-ST-ZIP HALLANDALE BEACH, FL 33009

TITLE MGR ☒ Change ☐ Addition
NAME EPELBOIM, NOEL
STREET ADDRESS 2500 E. HALLANDALE BEACH BLVD, SUITE T
CITY-ST-ZIP HALLANDALE BEACH, FL 33009

TITLE MGR ☒ Change ☐ Addition
NAME ROMASH, RICK
STREET ADDRESS 2500 E. HALLANDALE BEACH BLVD, SUITE T
CITY-ST-ZIP HALLANDALE BEACH, FL 33009

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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:

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

Date

Daytime Phone #

(954) 3852550