

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Mar 16, 2007 8:00 am
Secretary of State

03-16-2007 90156 044 ****50.00

DOCUMENT # L05000006286			
1. Entity Name 404 NW 2ND AVENUE, LLC			
Principal Place of Business 4280 SW 57 AVENUE DAVIE FL 33314 US		Mailing Address 4280 SW 57 AVENUE DAVIE FL 33314 US	
2. Principal Place of Business - No P.O. Box # 2040 NW 81st AVENUE Suite, Apt. #, etc. # 111		3. Mailing Address 2040 NW 81st AVENUE Suite, Apt. #, etc. # 111	
City & State PEMBROKE PINES, FLORIDA Zip 33024-3549 Country USA		City & State PEMBROKE PINES, FLORIDA Zip 33024-3549 Country USA	
6. Name and Address of Current Registered Agent RODRIGUEZ, RENE C 4280 SW 57 AVENUE DAVIE FL 33314		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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			
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2007			
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR RODRIGUEZ, RENE C 4280 SW 57 AVENUE DAVIE FL 33314 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR RODRIGUEZ, RENE C 2040 NW 81st AVENUE # 111 PEMBROKE PINES, FLORIDA 33024-3549 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR RODRIGUEZ, GIGI 4280 SW 57 AVENUE DAVIE FL 33314 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR RODRIGUEZ, GIGI 2040 NW 81st AVENUE # 111 PEMBROKE PINES, FLORIDA 33024-3549 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM RODRIGUEZ, MARIA E 4280 SW 57 AVENUE DAVIE FL 33314 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM RODRIGUEZ, MARIA E 2040 NW 81st AVENUE # 111 PEMBROKE PINES, FLORIDA 33024-3549 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 #

3/17/07