

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AK)

FILED
Apr 06, 2006 8:00 am
Secretary of State

02-09-2006 90152 030 ****50.00

DOCUMENT # L05000010091					
1. Entity Name 1170, LLC					
Principal Place of Business 21170 NE 22ND CT MIAMI FL 33180-1002			Mailing Address 21170 NE 22ND CT MIAMI FL 33180-1002		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 20-2967043	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent ROSEN, LAWRENCE N 21170 NE 22ND CT MIAMI FL 33180-1002				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 this State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ Signature is, separate divided names of registered agent and firm if applicable. (NOTE: Registered Agent signature required when changing)					
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State. Due By May 1, 2006					
9. MANAGING MEMBERS/MANAGERS					
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	JDGA DOBE LLC 3710 N. 37th Terrace Hollywood, FL 33021		☐ Delete	10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	MANAGER LAWRENCE N. ROSEN 21170 NE 22ND COURT MIAMI, FL 33180		☐ Delete	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP			☐ Delete	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP			☐ Delete	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP			☐ Delete	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP			☐ Delete	☐ 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, its receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: Lawrence N. Rosen MANAGER 4/26/06 305/933-9555 SIGNATURE AND COPY ON PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					

ATTACHMENT
300024251
#L05000010091

1170, LLC

21170 N. E. 22nd Court
Miami, Florida 33180
305-932-9955

April 3, 2006

Florida Department of State
P. O. Box 6478
Tallahassee, Florida 32314

Re: 1170, LLC - Reference Number L05000010091

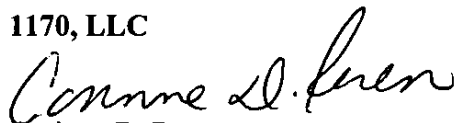
Dear Sir or Madam:

Attached for the fourth (4th) time is a corrected 2006 Limited Liability Company Annual Report, wherein we have crossed out the word "member" in **Item 9**, first box. Hopefully, this will be the last correction.

Please do not hesitate to contact me with any questions you may have.

Very truly yours,

1170, LLC



Corinne D. Rosen,
Administrative Assistant

/cdr

Enclosure