

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000022674

**FILED**  
**Jan 05, 2007**  
**Secretary of State**

**Entity Name:** MAXICON LLC

**Current Principal Place of Business:**

12550 BISCAYNE BLVD #204  
N MIAMI, FL 33181

**New Principal Place of Business:**

19501 NE 10TH AVENUE  
303  
NORTH MIAMI BEACH, FL 33179

**Current Mailing Address:**

12550 BISCAYNE BLVD #204  
N MIAMI, FL 33181

**New Mailing Address:**

19501 NE 10TH AVENUE  
303  
NORTH MIAMI BEACH, FL 33179

**FEI Number:** 37-1506805

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KLEIN, ANDRES  
12550 BISCAYNE BLVD #204  
N MIAMI, FL 33181 US

**Name and Address of New Registered Agent:**

KLEIN, ANDRES  
19501 NE 10TH AVENUE  
303  
NORTH MIAMI BEACH, FL 33179 US

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.

SIGNATURE: \_\_\_\_\_

01/05/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: NAIERMAN, SAMUEL  
Address: 12550 BISCAYNE BLVD #204  
City-St-Zip: N MIAMI, FL 33181

Title: MGRM ( ) Delete  
Name: KEIN, ANDRES  
Address: 12550 BISCAYNE BLVD #204  
City-St-Zip: N MIAMI, FL 33181

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: NAIERMAN, SAMUEL  
Address: 19501 NE 10TH AVENUE SUITE 303  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: MGRM (X) Change ( ) Addition  
Name: KEIN, ANDRES  
Address: 19501 NE 10TH AVENUE SUITE 303  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: SAMUEL NAIERMAN

MGRM

01/05/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date