## 2007 LIMITED LIABILITY COMPANY, ANNUAL REPORT

## **DOCUMENT # L05000031993**

1. Entity Name GALLERY 1377, LLC



FILED Feb 09, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

782 NW LE JEUNE ROAD, SUITE 4 MIAMI, FL 33126 782 NW LE JEUNE ROAD, SUITE 4 MIAMI, FL 33126



DO NOT WRITE IN THIS SPACE

01112007 No Chg-LLC CR2E083 (11/05)

4. FEI Number		Applied For
20-2626994		Not Applicable
5. Certificate of Status Desired	\$5.00	Additional

6. Name and Address of Current Registered Agent

KASABDJI, ELIAS 782 NW LE JEUNE ROAD, SUITE 4 MIAMI, FL 33126

STREET ADDRESS CITY-ST-ZIP

## DO NOT WRITE IN THIS SPACE

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		
F	lling Fee is \$50.00 ue by May 1, 2007		000000630192 02/19/07-80030-025 50.00		
9.	MANAGING MEMBERS/MANAGERS	<u> </u>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KASABDJI, ELIAS 782 NW LE JEUNE ROAD, SUITE 4 MIAMI, FL 33128				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE		1	•		

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 employered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOSGE KASALOJI 21107 786-552-7858