

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 03, 2007 08:00 A
Secretary of State

DOCUMENT # L05000033124

1. Entity Name
VERO ONE, LLC



Principal Place of Business
1197 S. ROGERS CIR
BOCA RATON, FL 33487

Mailing Address
1197 S. ROGERS CIR
BOCA RATON, FL 33487



04242007No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-2774748

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

LUBITZ, CHARLES A
515 NORTH FLAGLER DRIVE, SUITE 1700
WEST PALM BEACH, FL 33401

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IN THIS SPACE**

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**

U000000759832
05/24/07-80064-014 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GOLDSTEIN, DALE 1197 S. ROGERS CIR BOCA RATON, FL 33487
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LUPO, JACK 1197 S. ROGERS CIR BOCA RATON, FL 33487
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IN THIS SPACE**

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, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #