

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 05, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000045167

1. Entity Name
BUBBLE, L.L.C.



Principal Place of Business
**ONE ISLAND PLACE
3801 NORTHEAST 207TH SUITE 603
AVENTURA, FL 33180 US**

Mailing Address
**ONE ISLAND PLACE
3801 NORTHEAST 207TH SUITE 603
AVENTURA, FL 33180 US**



01252007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-2818794

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BEHAR, LARRY J P.A.
ONE ISLAND PLACE
3801 NORTHEAST 207TH SUITE 603
AVENTURA, FL 33180**

**DO NOT WRITE
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**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRG
NAME	BENICHO, JEAN-MARIE
STREET ADDRESS	3801 NORTHEAST 207TH SUITE 603
CITY-ST-ZIP	AVENTURA, FL 33180
TITLE	A
NAME	CATY, BRARI
STREET ADDRESS	3801 NORTHEAST 207TH SUITE 603
CITY-ST-ZIP	AVENTURA, FL 33180
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000622739
02/13/07-80038-009 50.00

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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

Driving Phone #