


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 13, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L05000045852</b> 1. Entity Name 819, LLC	
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Principal Place of Business 1104 NORTHWEST 1ST STREET FORT LAUDERDALE, FL 33311 US	Mailing Address 1104 NORTHWEST 1ST STREET FORT LAUDERDALE, FL 33311 US
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**DO NOT WRITE IN THIS SPACE**



04052007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-2791536	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent  SAUTTER, C. CHRISTIAN ESQ. 2850 NORTH ANDREWS AVENUE FORT LAUDERDALE, FL 33311
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**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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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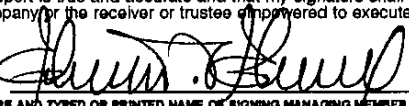
**Filing Fee is \$50.00  
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ELWELL, EDWIN C 1104 NORTHWEST 1ST STREET FORT LAUDERDALE, FL 33311
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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.

<b>SIGNATURE:</b>  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	EDWIN C. ELWELL	4/5/07	954 463 2563
		<small>Date</small>	<small>Daytime Phone #</small>