


**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Jan 19, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L05000048284</b>		
1. Entity Name L & L, LLC		
Principal Place of Business 120 MARTINIQUE AVENUE TAMPA, FL 33606	Mailing Address 120 MARTINIQUE AVENUE TAMPA, FL 33606	



01162007 No Chg-LLC CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 20-2811050	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

HINES, JAMES P  
 315 S. HYDE PARK AVENUE  
 TAMPA, FL 33606

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$50.00**  
**Due by May 1, 2007**

8. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM OSTERWEIL, LESLIE ANN 120 MARTINIQUE AVENUE TAMPA, FL 336064049
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FALK, LEE RICHARD 120 MARTINIQUE AVENUE TAMPA, FL 336064049
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**DO NOT WRITE 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.

*Leslie Ann Osterweil*