

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000050487

Entity Name: WEST AVE LLC

FILED
Feb 26, 2007
Secretary of State

Current Principal Place of Business:

1111 KANE CONCOURSE, SUITE 607
BAY HARBOR ISLANDS, FL 33154

New Principal Place of Business:

Current Mailing Address:

1111 KANE CONCOURSE, SUITE 607
BAY HARBOR ISLANDS, FL 33154

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAIJMAN, ARLENE ESQ
1111 KANE CONCOURSE, SUITE 607
BAY HARBOR ISLANDS, FL 33154 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: RAIJMAN, ARLENE
Address: 1111 KANE CONCOURSE, SUITE 607
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

Title: MGRM () Delete
Name: ROTBART, ERIKA DEUTSCH
Address: 7251 WEST PALMETTO PARK ROAD, SUITE 206
City-St-Zip: BOCA RATON, FL 33433

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: ARLENE RAIJMAN

MGRM

02/26/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date