


# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jan 22, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L05000053071</b> 1. Entity Name <b>GREENWEBSON LLC</b>	
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Principal Place of Business <b>C/O ALARON TRADING 822 W. WASHINGTON BLVD. CHICAGO, IL 60607</b>	Mailing Address <b>C/O ALARON TRADING 822 W. WASHINGTON BLVD. CHICAGO, IL 60607</b>
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01112007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>NOT APPLICABLE</b>	Applied For <input type="checkbox"/> 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  <b>GOLDBERG, THEODORE M ESQ. 3250 MARY STREET, SUITE 303 COCONUT GROVE, FL 33133</b>
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

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

U00000598648  
01/24/07-80084-016 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GREENBERG, STEVEN 822 W. WASHINGTON BLVD. CHICAGO, IL 60607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WEBER, GARY 822 W. WASHINGTON BLVD. CHICAGO, IL 60607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GREENBERG, CARRIE 822 W. WASHINGTON BLVD. CHICAGO, IL 60607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ISAACSON, BARRY 822 W. WASHINGTON BLVD. CHICAGO, IL 60607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**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.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

*[Signature]*  
1/12/2007 312-563-8325  
Date Daytime Phone #