2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jul 31, 2007 08:00 AM Secretary of State

576-496-2238 x12

Daytime Phone #

Dase

1. Entity Nam	MENT # L050000				orally of State
Principal Place 22354 SW 5 BOCA RATON	7TH AVENUE	Mailing Address 6900 IERICHO TURNPIKE SUITE 312 SYOSSET, NY 11791 US			
DO NOT WRITE IN THIS SPACE				07162007No Chg-LLC CF 4. FEI Number 76-0794082 5. Certificate of Status Desired	22E083 (11/05) Applied For Not Applicable \$5.00 Additional Fee Required
6. Name and Address of Current Registered Agent MEINBERG, MARK 22354 SW 57TH AVENUE BOCA RATON, FL 33428			DO NOT WRITE IN THIS SPACE		
the obligat	named entity submits this statement ons of registered agent. Signature typed or partied name of registered a ing Fee is \$50.00 by September 14, 2007		ed office or register	ed agent, or both, in the State of Florida. I when reinstating) DA	
9. TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP	MANAGING MEI MGRM MEINBERG, MARK 6900 JERICHO TURNPIKE, S SYOSSET, NY 11791	MBERS/MANAGERS UITE 312		U000007708 07/31/07-8000	317 32-009 50.00
TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP				DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP					
indicated	on this report is true and accurate	with this filing does not qualify for the ex and that my signature shall have the sar istee empowered to execute this report	ne legal effect as if	d in Chapter 119, Florida Statutes, I further made under oath; that I am a managing pter 608, Florida Statutes.	certify that the information member or manager of the