

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000062504

FILED  
Apr 08, 2007  
Secretary of State

Entity Name: ZANDER'S WORLD PROPERTIES, L.L.C.

## Current Principal Place of Business:

2100 N.E. 121 ROAD  
NORTH MIMAI, FL 33181

## New Principal Place of Business:

2100 N.E. 121 ROAD  
MIAMI, FL 33181

## Current Mailing Address:

2100 N.E. 121 ROAD  
NORTH MIMAI, FL 33181

## New Mailing Address:

2100 N.E. 121 ROAD  
MIAMI, FL 33181

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PUJOLS, JOSE R ESQ  
2701 S. LEJEUNE ROAD, SUITE 401  
CORAL GABLES, FL 33134 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: GOTLINSKY, DAVID  
Address: 2100 N.E. 121 ROAD  
City-St-Zip: NORTH MIMAI, FL 33181

Title: MGRM ( ) Delete  
Name: GOTLINSKY, ADYELIN  
Address: 2100 N.E. 121 ROAD  
City-St-Zip: NORTH MIMAI, FL 33181

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: GOTLINSKY, DAVID  
Address: 2100 N.E. 121 ROAD  
City-St-Zip: MIAMI, FL 33181

Title: MGRM (X) Change ( ) Addition  
Name: GOTLINSKY, ADYELIN  
Address: 2100 N.E. 121 ROAD  
City-St-Zip: MIAMI, FL 33181

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: DAVID GOTLINSKY

MGRM

04/08/2007

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