
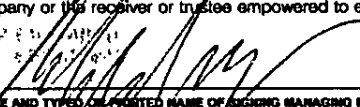


**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Feb 28, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L05000075999</b> 1. Entity Name <b>SINGER FAMILY, L.L.C.</b>		
Principal Place of Business <b>5474 SAN MARINO WAY LAKE WORTH, FL 33467</b>	Mailing Address <b>2069 BERKLEY LANE MERRICK, NY 11566</b>	
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent  <b>SINGER, ROBERT 5474 SAN MARINO WAY LAKE WORTH, FL 33467</b>		<b>DO NOT WRITE IN THIS SPACE</b>
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing) DATE</small>		
<b>FILE NOW!!! FEE IS \$138.75</b> <b>After May 1, 2008 Fee will be \$538.75</b>		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SINGER, ROBERT 2069 BERKLEY LANE MERRICK, NY 11566	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SINGER, EILEEN 2069 BERKLEY LANE MERRICK, NY 11566	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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:  <b>Robert Singer</b> 2/20/08 516 623-7396 <small>SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>		



01072008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number <b>51-0051452</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

U00000843105  
03/11/08-80057-008 138.75

**DO NOT WRITE  
IN THIS SPACE**