

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000082591

Entity Name: 7950 ABBOTT, LLC

FILED  
May 01, 2006  
Secretary of State

**Current Principal Place of Business:**

7950 ABBOTT AVENUE  
MIAMI BEACH, FL 33141

**New Principal Place of Business:**

7950 ABBOTT AVENUE  
APARTMENT 15  
MIAMI BEACH, FL 33141

**Current Mailing Address:**

7950 ABBOTT AVENUE  
MIAMI BEACH, FL 33141

**New Mailing Address:**

500 BRYANT STREET  
SUITE 101  
SAN FRANCISCO, CA 94107

FEI Number: 20-3612436      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

ARAN, FERNANDO  
C/O ARAN CORREA GUARCH & SHAPIRO, P.A.  
710 S. DIXIE HIGHWAY  
CORAL GABLES, FL 33146 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: GOHEL, ANAND  
Address: 500 BRYAN STREET, SUITE 101  
City-St-Zip: SAN FRANCISCO, CA 94107

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: GOHEL, ANAND  
Address: 500 BRYANT STREET, SUITE 101  
City-St-Zip: SAN FRANCISCO, CA 94107

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: ANAND R GOHEL

MGMR

05/01/2006

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