## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L05000118422

1. Entity Name WSG REGALIA, LLC



60031239

Principal Place of Business

NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

400 ARTHUR GODFREY ROAD, SUITE 200 MIAMI BEACH, FL 33140

Mailing Address

400 ARTHUR GODFREY ROAD, SUITE 200 MIAMI BEACH, FL 33140

## DO NOT WRITE IN THIS SPACE 031720 4 EFIN



**FILED** 

Apr 29, 2008 8:00 am Secretary of State

04-29-2008 90021 036 \*\*\*138.75

03172008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number

Applied Fo

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

LAMONT NEIMAN INTERIAN & BELLET, P.A. ONE BISCAYNE TOWER, 3550 TWO SOUTH BISCAYNE BOULEVARD MIAMI, FL 33131

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	named entity submits this statement for the purpose of chaions of registered agent.	nging its registered office or registered agent, or both, in the	State of Florida. I am familiar with, and ac
SIGNATURE_	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
	NOWIII FEE IS \$138.75 7 1, 2008 Fee will be \$538.75		
9.	MANAGING MEMBERS/MANAGERS		
TITLE	MGRM		
NAME	SHEPPARD, ERIC	•	
STREET ADDRESS	400 ARTHUR GODFREY #200		
CITY-ST-ZIP	MIAMI BEACH, FL 33140		
TITLE			
NAME			
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NAME		1 "" ""	O O! AOL
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 informat 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 limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

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