2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 12, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000000209

1. Entity Name
DOUGLAS KAHANE, LLC

Principal Place of Business	Mailing Address
5 CARL COURT BEVERLY HILLS, FL 34465 US	PO BOX 640251 BEVERLY HILLS,, FL 34464-0251 US

01032008No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-4024833
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

KAHANE, DOUGLAS I
5 CARL COURT
BEVERLY HILLS, FL 34465

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

000000825649
02/21/08-80017-021 138.75

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	KAHANE, DOUGLAS IAN
STREET ADDRESS	PO BOX 640251
CITY-ST-ZIP	BEVERLY HILLS, FL 344640251
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	

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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: Douglas I. Kahane DOUGLAS I. KAHANE 2/3/08 305-2 746 1718
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #