



# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**May 01, 2007 8:00 am**  
**Secretary of State**

05-01-2007 90324 022 \*\*\*\*55.00

<b>DOCUMENT # L06000008026</b>					
<b>1. Entity Name</b> IN-TOUCH COMMUNICATIONS BISCAYNE LANDING, LLC					
<b>Principal Place of Business</b> 321 EAST HILLSBORO BLVD. DEERFIELD BEACH, FL 33441			<b>Mailing Address</b> 321 EAST HILLSBORO BLVD. DEERFIELD BEACH, FL 33441		
<b>2. Principal Place of Business - No P.O. Box #</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	01302007    Chg-LLC    CR2E083 (12/06)	
<b>4. FEI Number</b> 20-4230584				Applied For <input type="checkbox"/> Not Applicable	
<b>5. Certificate of Status Desired</b> <input checked="" type="checkbox"/> <b>XXX</b>				<b>\$5.00</b> Additional Fee Required	
<b>6. Name and Address of Current Registered Agent</b>			<b>7. Name and Address of New Registered Agent</b>		
STOTZER, THEODORE R 321 EAST HILLSBORO BLVD. DEERFIELD BEACH, FL 33441			Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code		
<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.</b>					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)    DATE _____					
<b>Filing Fee is \$50.00 Due by May 1, 2007</b>		<b>Make check payable to Florida Department of State</b>			
<b>9. MANAGING MEMBERS/MANAGERS</b>			<b>10. ADDITIONS/CHANGES</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
			MGRM/P Brian Street 321 East Hillsboro Blvd. Deerfield Beach, FL 33441		
			V James H. Cohen 321 East Hillsboro Blvd. Deerfield Beach, FL 33441		
<b>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 partner or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.</b>					
IN-TOUCH COMMUNICATIONS BISCAYNE LANDING, LLC					
<b>SIGNATURE: By:</b> 			March 8, 2007    (954) 949-3480		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE James H. Cohen, Vice President			Date    Daytime Phone #		