## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # L06000015715**

1. Entity Name

IVES DAIRY WAREHOUSE ACQUISITION, LLC



FILED Apr 14, 2008 08:00 A Secretary of State

Principal Place of Business

Mailing Address

672 EAST HALLANDALE BEACH BOULEVARD HALLANDALE, FL 33009 US

672 EAST HALLANDALE BEACH BOULEVARD HALLANDALE, FL 33009 US



01132008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number				Applied For
20-4304872				Not Applicable
5. Certificate of Status Desired	П	\$5.0	00	Additional

HILIHHILI UUU DATEU

6. Name and Address of Current Registered Agent

KOENIGSBERG, JAY 1200 BRICKELL AVENUE SUITE 1900 MIAMI, FL 33131

the obligations of registered agent.

## DO NOT WRITE IN THIS SPACE

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FILE After May	NOW!!! FEE IS \$138.75 / 1, 2008 Fee will be \$538.75		04/25/08-80027-003 138.75
9.	MANAGING MEMBERS/MANAGERS	\$ 45 M	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SCHWARTZ, DANIEL J 672 EAST HALLANDALE BEACH BOULEVARD HALLANDALE, FL 33009		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LANSBURGH, ROBERT C 672 EAST HALLANDALE BEACH BOULEVARD HALLANDALE, FL 33009		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE
TITLE			

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

(NOTE: Registered Agent stonet are required when reinstalling)

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 ampowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:  $\angle$ 

NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR FRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/14/08

Daytime Phone #