

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000019418

Entity Name: LUCKYMAN LLC

FILED  
Jun 05, 2007  
Secretary of State

**Current Principal Place of Business:**

1648 NE 183RD STREET  
NORTH MIAMI BEACH, FL 33179

**New Principal Place of Business:**

1301 NE 204TH TERR  
MIAMI, FL 33179

**Current Mailing Address:**

1648 NE 183RD STREET  
NORTH MIAMI BEACH, FL 33179

**New Mailing Address:**

1301 NE 204TH TERR  
MIAMI, FL 33179

FEI Number: 16-1750889      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:**

NIETO, LUCAS M  
1648 NE 183RD STREET  
NORTH MIAMI BEACH, FL 33179      US

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

NIETO, LUCAS M  
1301 NE 204TH TERR  
MIAMI, FL 33179      US

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: \_\_\_\_\_

06/05/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: NIETO, LUCAS M  
Address: 1648 NE 183RD STREET  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

**ADDITIONS/CHANGES:**

Title: MGR      (X) Change ( ) Addition  
Name: NIETO, LUCAS M  
Address: 1301 NE 204TH TERR  
City-St-Zip: MIAMI, FL 33179

I hereby certify that the information supplied with this filing does not qualify 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: LUCAS M. NIETO

MGR

06/05/2007

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