

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000025437

Entity Name: E Z & ASSOCIATES, LLC

FILED
Aug 09, 2007
Secretary of State

Current Principal Place of Business:

P.O. BOX 24973
FORT LAUDERDALE, FL 33307 US

New Principal Place of Business:

3023 NE 5TH TERRACE
WILTON MANORS, FL 33334 US

Current Mailing Address:

P.O. BOX 24973
FORT LAUDERDALE, FL 33307 US

New Mailing Address:

FEI Number: 20-4455390 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:

Name and Address of New Registered Agent:

LAW OFFICES OF MILLIEN JEAN FELIX
ONE OAKWOOD BLVD
SUITE 230
HOLLYWOOD, FL 33020 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PAUL, ESPOSITO
Address: 3023 NE 5TH TERRACE
City-St-Zip: WILTON MANORS, FL 33334 US

Title: MGRM () Delete
Name: ZAMBRANO, NAPOLEON
Address: 3023 NE 5TH TERRACE
City-St-Zip: WILTON MANORS, FL 33334 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ESPOSITO, PAUL M
Address: 3023 NE 5TH TERRACE
City-St-Zip: WILTON MANORS, FL 33334 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PAUL M. ESPOSITO

MGR

08/09/2007

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