

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000028112

FILED  
Apr 13, 2007  
Secretary of State

Entity Name: EIGLARSH EXECUTIVE OFFICES, LLC

**Current Principal Place of Business:**

2625 WESTON ROAD  
WESTON, FL 33331

**New Principal Place of Business:**

**Current Mailing Address:**

2625 WESTON ROAD  
WESTON, FL 33331

**New Mailing Address:**

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JAKOB, ANDREA L ESQ.  
2500 WESTON ROAD  
317  
WESTON, FL 33331 US

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

JOEL, SANDERS CPA  
1301 SHOTGUN ROAD  
WESTON, FL 33326 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: JOEL SANDERS, CPA

04/13/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: EIGLARSH, DAVID  
Address: 2625 WESTON ROAD  
City-St-Zip: WESTON, FL 33331

Title: MGRM ( ) Delete  
Name: EIGLARSH, DOROTHY  
Address: 2625 WESTON ROAD  
City-St-Zip: WESTON, FL 33331

**ADDITIONS/CHANGES:**

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID EIGLARSH

MGMR

04/13/2007

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