


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 03, 2008 08:00 A
Secretary of State

DOCUMENT # L06000052461 1. Entity Name FINANCIAL MANAGEMENT OF FLORIDA LLC	
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Principal Place of Business 3814 CURTISS PARKWAY VIRGINIA GARDENS, FL 33166	Mailing Address 3814 CURTISS PARKWAY VIRGINIA GARDENS, FL 33166
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DO NOT WRITE IN THIS SPACE



01222008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 42-1723649	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**LA FORGIA, ANTHONY
3814 CURTISS PARKWAY
VIRGINIA GARDENS, FL 33166**

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

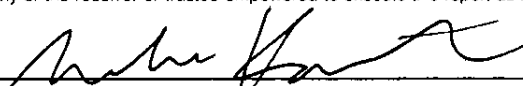

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LA FORGIA, ANTHONY 3814 CURTISS PARKWAY VIRGINIA GARDENS, FL 33166
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03/18/08-80047-004 138.75

**DO NOT WRITE
IN THIS SPACE**

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

SIGNATURE:  **CF0** **1/20/08** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #