02-15-2008 90052 039 ***138.50
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2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

08 FEB 27 AM 10:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L06000068101

1. Entity Name
MITCHELL J. HOWARD, LLC

Principal Place of Business	Mailing Address
3800 S. OCEAN DRIVE 812A HOLLYWOOD, FL 33019	3800 S. OCEAN DRIVE SUITE 228 HOLLYWOOD, FL 33019

DO NOT WRITE IN THIS SPACE

01222008 No Chg-LLC CR2E083 (12/07)

4. FEI Number
20-5183389

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired. ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MITCHELL, HOWARD J
3800 S. OCEAN DRIVE
812A
HOLLYWOOD, FL 33019

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	HOWARD, MITCHELL J
STREET ADDRESS	3800 S. OCEAN DRIVE 812A
CITY-ST-ZIP	HOLLYWOOD, FL 33019
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: Mitchell J. Howard Owner 2/8/08 954.454.1119
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #