2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L06000072366

1. Entity Name NW 18TH AVENUE LLC



Principal Place of Business

1357 SEMINOLE DRIVE

FT. LAUDERDALE, FL 33304 U

Mailing Address

1357 SEMINOLE DRIVE

FT. LAUDERDALE, FL 33304 U

US

FILED Jul 16, 2008 08:00 AM Secretary of State



07062008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-5255868

5. Certificate of Status Desired

\$5.00 Additional Fee Required

Applied For

Not Applicable

6. Name and Address of Current Registered Agent

EVANS, BRUCE E 190 WEST PALMETTO PARK ROAD BOCA RATON, FL 33432

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50071411011,12 00102			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			
FILE NOWIII FEE IS \$138.75 In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.			
9.	MANAGING MEMBER	RS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SINGER, ALLEN 1357 SEMINOLE DRIVE FT. LAUDERDALE, FL 33304		U00000955174
TITLE NAME STREET ADDRESS CITY-ST-ZIP			U77167U8-8UUUS-023 138.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE
TITLE NAME STREET ADDRESS			

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:

CHY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CHY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/14/08

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