

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000076726

Entity Name: A FORTUNE LLC

FILED  
Apr 07, 2007  
Secretary of State

**Current Principal Place of Business:**

2715 NORTH AUSTRALIAN AVENUE  
SUITE A  
WEST PALM BEACH, FL 33407 US

**New Principal Place of Business:**

**Current Mailing Address:**

2715 NORTH AUSTRALIAN AVENUE  
SUITE A  
WEST PALM BEACH, FL 33407 US

**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:**

LEE, MONICA  
2715 NORTH AUSTRALIAN AVENUE  
SUITE A  
WEST PALM BEACH, FL 33407 US

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

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: LEE, MONICA  
Address: 2715 NORTH AUSTRALIAN AVENUE, SUITE A  
City-St-Zip: WEST PALM BEACH, FL 33407 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: LEE, MONICA  
Address: 2715 NORTH AUSTRALIAN AVENUE, SUITE A  
City-St-Zip: WEST PALM BEACH, FL 33407 US

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: MONICA LEE

MGR

04/07/2007

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