

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000088081

Entity Name: C O EQUITIES, LLC

FILED
Apr 30, 2007
Secretary of State

Current Principal Place of Business:

10 FAIRWAY DRIVE
SUITE 302
DEERFIELD BEACH, FL 33441

New Principal Place of Business:

270 S.W. NATURA AVENUE
DEERFIELD BEACH, FL 33441

Current Mailing Address:

10 FAIRWAY DRIVE
SUITE 302
DEERFIELD BEACH, FL 33441

New Mailing Address:

270 S.W. NATURA AVENUE
DEERFIELD BEACH, FL 33441

FEI Number: 20-5509563

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALFASI, JACK
10 FAIRWAY DRIVE
SUITE 302
DEERFIELD BEACH, FL 33441 US

Name and Address of New Registered Agent:

ALFASI, JACK
270 S.W. NATURA AVENUE
DEERFIELD BEACH, FL 33441 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:

04/30/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ALFASI, JACK
Address: 10 FAIRWAY DRIVE, SUITE 302
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: MGR () Delete
Name: ADAR, AMRAM
Address: 1250 HALLANDALE BEACH BLVD., SUITE 404
City-St-Zip: HALLANDALE BEACH, FL 33009

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ALFASI, JACK
Address: 270 S.W. NATURA AVENUE
City-St-Zip: DEERFIELD BEACH, FL 33441

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

I hereby certify that the information supplied with this filing does not qualify 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: ALFASI, JACK

P

04/30/2007

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