

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000098821

FILED
Apr 17, 2007
Secretary of State

Entity Name: SEW NEW, LLC

Current Principal Place of Business:

11428 SW 109TH RD.
MIAMI, FL 33176

New Principal Place of Business:

Current Mailing Address:

11428 SW 109TH RD.
MIAMI, FL 33176

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FORMAN, LAWRENCE S
11428 SW 109TH RD.
MIAMI, FL 33176 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: MGR () Delete
Name: FORMAN, DAVID
Address: 11428 SW 109TH RD.
City-St-Zip: MIAMI, FL 33176

Title: MGR () Delete
Name: FORMAN, RACHEL
Address: 11428 SW 109TH RD.
City-St-Zip: MIAMI, FL 33176

Title: MGR () Delete
Name: WICENTOWSKY, MICHAEL
Address: 11428 SW 109TH RD.
City-St-Zip: MIAMI, FL 33176

Title: MGR () Delete
Name: WICENTOWSKY, ELLIOT
Address: 11428 SW 109TH RD.
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES:

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

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

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

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

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: DAVID FORMAN

SECT

04/17/2007

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