
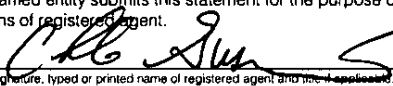
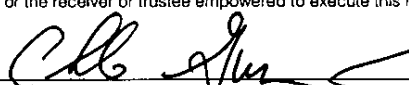


# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 17, 2007 8:00 am**  
**Secretary of State**

04-17-2007 90253 035 \*\*\*\*50.00

<b>DOCUMENT # L06000109196</b> 1. Entity Name 1418, LLC					
Principal Place of Business 790 HILLBRATH DR LANTANA, FL 33462			Mailing Address 790 HILLBRATH DR LANTANA, FL 33462		
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.			
City & State  Zip      Country		City & State  Zip      Country		4. FEI Number <div style="font-size: 1.2em; font-family: monospace;">20-5860248</div> <div style="float: right; font-size: 0.8em;"> <input type="checkbox"/> Applied For  <input type="checkbox"/> Not Applicable         </div>	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b>				01302007    Chg-LLC    CR2E083 (12/06)	
<b>6. Name and Address of Current Registered Agent</b>  GUSMANO, CHARLES MANAGER 790 HILLBRATH DR LANTANA, FL 33462			<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;">FL      Zip Code</span>		
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. <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;">           SIGNATURE   <small>Signature, typed or printed name of registered agent and fee, if applicable.</small> </div> <div style="width: 30%; text-align: center;"> <small>(NOTE: Registered Agent signature required when reinstating)</small> </div> <div style="width: 30%; text-align: right;">           DATE         </div> </div>					
<b>Filing Fee is \$50.00 Due by May 1, 2007</b>		<b>Make check payable to Florida Department of State</b>			
<b>9. MANAGING MEMBERS/MANAGERS</b>			<b>10. ADDITIONS/CHANGES</b>		
<small>TITLE NAME STREET ADDRESS CITY-ST-ZIP</small>	MGRM GUSMANO, CHARLES MANAGER 790 HILLBRATH DR LANTANA, FL 33462	<input type="checkbox"/> Delete			
<small>TITLE NAME STREET ADDRESS CITY-ST-ZIP</small>		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<small>TITLE NAME STREET ADDRESS CITY-ST-ZIP</small>		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<small>TITLE NAME STREET ADDRESS CITY-ST-ZIP</small>		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<small>TITLE NAME STREET ADDRESS CITY-ST-ZIP</small>		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<small>TITLE NAME STREET ADDRESS CITY-ST-ZIP</small>		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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.					
<b>SIGNATURE:</b> 		4/6/07		561-582-6688	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>		<small>Date</small>		<small>Daytime Phone #</small>	