

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000120111

FILED
Feb 22, 2007
Secretary of State

Entity Name: ESQUENAZI, DOLINSKY & WAINSTEIN, L.L.C.

Current Principal Place of Business:

800 SE 3RD AVE
300
FT LAUDERDALE, FL 33316

New Principal Place of Business:

Current Mailing Address:

800 SE 3RD AVE
300
FT LAUDERDALE, FL 33316

New Mailing Address:

FEI Number: 71-1018521 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESQUENAZI, CRAIG S
800 SE 3RD AVE
300
FT LAUDERDALE, FL 33316 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: ESQUENAZI, CRAIG S
Address: 800 SE 3RD AVE, SUITE 300
City-St-Zip: FT LAUDERDALE, FL 33316

Title: MGR () Delete
Name: DOLINSKY, CHANEL
Address: 800 SE 3RD, SUITE 300
City-St-Zip: FT LAUDERDALE, FL 33316

Title: MGR () Delete
Name: WAINSTEIN, VICTOR
Address: 800 SE 3RD AVE, SUITE 300
City-St-Zip: FT LAUDERDALE, FL 33316

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:

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: CHANEL DOLINSKY MGR 02/22/2007

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