



**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

FILED

07 AUG 16 PM 1:54

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

<b>DOCUMENT # L06000122182</b>					
1. Entity Name VC 902 HOLDINGS LLC					
Principal Place of Business 1010 SW 21ST STREET FT LAUDERDALE, FL 33315		Mailing Address 1010 SW 21ST STREET FT LAUDERDALE, FL 33315		 05032007 Chg-LLC CR2E083 (12/06) 4. FEI Number <b>20-8085735</b> Applied For Not Applicable 5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suito, Apt. #, etc.		Suito, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent  KOSSOW, KENNETH D 1325 DIPLOMAT PARKWAY HOLLYWOOD, FL 33019			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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.					
SIGNATURE _____ DATE _____ <small>Signature, hand or printed name of registered agent and filer if applicable. FILER: Registered Agent signature required when withdrawing.</small>					
Filing Fee is \$50.00 Due by September 14, 2007		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM ROVITO, KELLY A 1010 SW 21ST STREET FT LAUDERDALE, FL 33315	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	8/16/07 <i>[Signature]</i>
91. 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/trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: <i>Kelly A Rovito</i>				Date: 8/22/07	
<small>SIGNATURE AND TITLE OR PRINTED NAME OF PERSON MAKING REPORT, EQUALLY OR AUTHORIZED REPRESENTATIVE</small>					