2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Mar 06, 2008 08:00 AN Secretary of State

1. Entity Nam	MENT # L07000006				Secre	tary	of Sta		
Principal Plac 6312 POLK : HOLLYWOOD		Mailing Address 6312 POLK STREET HOLLYWOOD, FL 33024						(
2. Principal P	Place of Business - No P.O. Box #	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			02212008	Chg-LLC	CR2E08	33 (12/06)	
City & State		City & State		4. FEI Numb	er 22-3951638		<u> </u>	pplied For of Applicable	
Zip	Country	Zip	Country	у .	5. Certificate	of Status Desired		5.00 Add ee Required	
	6. Name and Address of Current F	Registered Agent		Name	7. Name and	Address of New	Registered A	gent	
1840 SW 2			- Street Address		P.O. Box Numb	er is Not Acceptat	ole)		
4TH FLOC MIAMI, FL								Tarani	
				City			FL	Zip Code	
	named entity submits this statement for ions of registered agent.	the purpose of changing its	s registered	a office or register	ed agent, or bo	in, in the State of F	-iorida, famira	muar wiin,	and accept
SIGNATURE.	Signature, typed or printed name of registered agent ar	nd little if applicable (NOT	TE- Registered /	Agent signature required	when renstating)		DATE		
	: NOWILL FEE IS \$138.75 / 1, 2008 Fee will be \$538.75						ike check pa da Departme		i
9.	MANAGING MEMBER	RS/MANAGERS	10.			ADDITION	S/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HARRIS, EDDIE L JR. 6312 POLK STREET HOLLYWOOD, FL 33024			I ADDRESS	U00000849099 Change Addition 03/21/08-80006-020 138.75				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET CITY-S	ADDRESS				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete			ADDRESS ST-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME	ADDRESS				Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME	ADDRESS		•		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE	ADDRESS				☐ Change	Addition
11. I hereby of indicated limited ha	certify that the information supplied with on this report is true and accurate and to bility company or the receiver or trustee	this filing does not qualify to hat my signature shall have empewered to execute this			2	Florida Statutes I; that I am a mana Statutes	954-6	that the informanage	rmation r of the