


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 18, 2008 8:00 am
Secretary of State

04-18-2008 90157 043 ***143.75

DOCUMENT # L07000011431					
1. Entity Name ANTIQUE ALLEY LLC					
Principal Place of Business 225 SOUTH OLIVE AVENUE WEST PALM BEACH, FL 33401			Mailing Address 225 SOUTH OLIVE AVENUE WEST PALM BEACH, FL 33401		
2. Principal Place of Business - No P.O. Box # 2101 VISTA PARKWAY		3. Mailing Address 2101 VISTA PARKWAY			
Suite, Apt. #, etc. 224		Suite, Apt. #, etc. 224			
City & State WEST PALM BEACH		City & State WEST PALM BEACH		04122008 Chg-LLC CR2E083 (12/06)	
Zip 33411		Country P.B.		4. FEI Number 657230515	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent DANTON, RICHARD 225 SOUTH OLIVE AVENUE WEST PALM BEACH, FL 33401			7. Name and Address of New Registered Agent Name: RICHARD DANTON Street Address (P.O. Box Number is Not Acceptable): 2101 VISTA PARKWAY - SUITE 224 City: WEST PALM BEACH FL Zip Code: 33411		
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: <u>Richard Danton</u> DATE: <u>4-15-08</u> <small>(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating))</small>					
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE: MGR NAME: DANTON, RICHARD STREET ADDRESS: 225 SOUTH OLIVE AVENUE CITY-ST-ZIP: WEST PALM BEACH, FL 33401	<input checked="" type="checkbox"/> Delete		TITLE: MGR NAME: DANTON, RICHARD STREET ADDRESS: 2101 VISTA PARKWAY - SUITE 224 CITY-ST-ZIP: WEST PALM BEACH, FL 33411	<input checked="" 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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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.					
SIGNATURE: <u>Richard Danton</u>			Date: <u>4-15-08</u>		Daytime Phone #: <u>561-309-8726</u>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					