

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000073853

FILED  
Apr 17, 2008  
Secretary of State

Entity Name: CITY LIMIT PROPERTIES, LLC

## Current Principal Place of Business:

2875 NE 191 STREET  
STE. 304  
AVENTURA, FL 33180 US

## New Principal Place of Business:

945 S. FEDERAL HWY  
DANIA BEACH, FL 33004 US

## Current Mailing Address:

1925 MADISON STREET  
STE. 5  
HOLLYWOOD, FL 33020 US

## New Mailing Address:

945 S. FEDERAL HWY  
DANIA BEACH, FL 33004 US

FEI Number: 26-0685180

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STOK, ROBERT A  
2875 NE 191 STREET  
STE. 304  
AVENTURA, FL 33180 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: MGRM ( ) Delete  
Name: JAFFEE, SCOTT  
Address: 1925 MADISON STREET, STE. 5  
City-St-Zip: HOLLYWOOD, FL 33020 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: JAFFEE, SCOTT  
Address: 945 S. FEDERAL HWY  
City-St-Zip: DANIA BEACH, FL 33004 US

Title: MGR ( ) Change (X) Addition  
Name: KATES, STEVEN  
Address: 945 S. FEDERAL HWY  
City-St-Zip: DANIA BEACH, FL 33004

I hereby certify that the information supplied with this filing does not qualify 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: SCOTT JAFFEE

MGR

04/17/2008

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