

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jan 07, 2008 8:00 am**  
**Secretary of State**

01-07-2008 90047 032 \*\*\*138.75

**DOCUMENT # L07000110745**

1. Entity Name  
**ENID SCHWARTZ OF FLORIDA, LLC**



Principal Place of Business  
111 S.E. 8TH AVENUE, APT. 801  
FORT LAUDERDALE, FL 33301

Mailing Address  
111 S.E. 8TH AVENUE, APT. 801  
FORT LAUDERDALE, FL 33301

2. Principal Place of Business - No P.O. Box #

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



01032008 Chg-LLC CR2E083 (12/06)

4. FEI Number  
**26-1216627**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**SCHWARTZ, WARREN**  
111 S.E. 8TH AVENUE, APT. 801  
FORT LAUDERDALE, FL 33301

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**MGRM**  
**SCHWARTZ, WARREN**  
111 S.E. 8TH AVENUE, APT. 801  
FORT LAUDERDALE, FL 33301

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**MGR**  
**SCHWARTZ, ENID**  
111 S.E. 8TH AVENUE, APT. 801  
FORT LAUDERDALE, FL 33301

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**MGR**  
**SCHWARTZ, ALEXANDER**  
111 S.E. 8TH AVENUE, APT. 801  
FORT LAUDERDALE, FL 33301

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**MGR**  
**KMPLOWITZ, JEFFREY**  
56 CHERRY ST  
JERSEY CITY, NJ 07305

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
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CITY-ST-ZIP

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CITY-ST-ZIP

☐ Change ☐ Addition

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

*[Handwritten Signature]*