

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 16, 2006 8:00 am**  
**Secretary of State**

03-16-2006 90033 039 \*\*\*\*50.00

<b>DOCUMENT # L94000000059</b>					
<b>1. Entity Name</b> DAVID MAYER, L.C.					
<b>Principal Place of Business</b> 2002 GRANT ST. HOLLYWOOD, FL 33020			<b>Mailing Address</b> 125 N. 46TH AVENUE HOLLYWOOD, FL 33021-6601		
<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	<b>4. FEI Number</b> 59-1934035	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>				<b>\$5.00 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>			<b>7. Name and Address of New Registered Agent</b>		
GOTTLIEB, BRUCE M 125 N. 46TH AVENUE HOLLYWOOD, FL 33021-6601			Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;"><b>FL</b></span> Zip Code		
<b>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.</b>					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>Filing Fee is \$50.00 Due by May 1, 2006</b>		<b>Make check payable to Florida Department of State</b>			
<b>9. MANAGING MEMBERS/MANAGERS</b>			<b>10. ADDITIONS/CHANGES</b>		
<b>TITLE</b> MGR <b>NAME</b> ZIEFER, MAYER <b>STREET ADDRESS</b> 2002 GRANT ST. <b>CITY-ST-ZIP</b> HOLLYWOOD, FL 33020	<input checked="" type="checkbox"/> Delete		<b>TITLE</b> MGR <b>NAME</b> Gottlieb, Kenneth A. <b>STREET ADDRESS</b> 125 N. 46 Avenue <b>CITY-ST-ZIP</b> Hollywood, FL 33021	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
<b>TITLE</b> MGR <b>NAME</b> GOTTLIEB, BRUCE M <b>STREET ADDRESS</b> 125 N. 46TH AVENUE <b>CITY-ST-ZIP</b> HOLLYWOOD, FL 33021	<input type="checkbox"/> Delete		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>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.</b>					
<b>SIGNATURE:</b> <i>Bruce M. Gottlieb</i> <b>Manager</b>			<b>2/22/06</b> (954) 966-7900		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date Daytime Phone #		

ATTACHMENT

# Gottlieb & Gottlieb

ATTORNEYS AT LAW

A Professional Association

www.gottlielaw.com

Bruce M. Gottlieb

125 NORTH 46TH AVENUE, HOLLYWOOD, FLORIDA 33021-6601

Broward 954-966-7900

Kenneth A. Gottlieb

Dade 305-524-4777

Division of Corporations

P. O. Box 16478

Tallahassee, FL 32314

Toll Free 800-330-7900

Fax 954-966-7905

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#L94000000059

March 7, 2006

RE: 2006 Uniform Business Reports

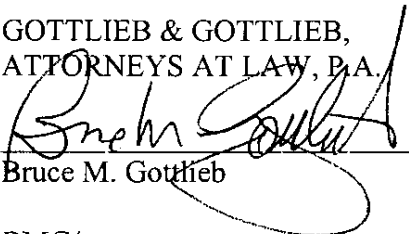
OUR FILE NUMBER: 4698

Gentlemen:

Enclosed, for filing with the Florida Department of State, is the 2006 Annual Report for David Mayer, L.C., together with the filing fee of \$50.00.

Very truly yours,

GOTTLIEB & GOTTLIEB,  
ATTORNEYS AT LAW, P.A.

  
Bruce M. Gottlieb

BMG/aw

Enclosures