2007 LIMITED LIABILITY COMPANY

ANNUAL REPORT **

1. Entity Name

GREITHER HOLDINGS, LC

DOCUMENT # L95000000685



Feb 23, 2007 08:00 Al Secretary of State

FILED

Principal Place of Business

14231 S.W. 119TH AVE. MIAMI, FL 33186

Mailing Address

14231 S.W. 119TH AVE. MIAMI, FL 33186



01112007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number			Applied For	
65-0608705			Not Applicable	
5. Certificate of Status	Desired	,	5.00 Additional	

DO NOT WRITE IN THIS SPACE

SIGNATURE AND TIPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

6. Name and Address of Current Registered Agent

GREITHER, PETER 14205 S.W. 119TH AVENUE MIAMI, FL 33186

DO NOT WRITE IN THIS SPACE

		h '	
	named entity submits this statement for the purpose of changing its registere ions of registered agent	d office or registered agent, or both, in the State of I	Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered	Agent signature required when reinstating)	DATE
· · · · · ·	Signature, typed or printed name or registered agent and size it approache (NOTE, registered	I Whole signature Lectured at lot Languages 31	<i>D</i> ATE
Fi	ling Fee is \$50.00 ue by May 1, 2007	I	
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GREITHER, PETER 14205 SOUTH WEST 119TH AVENUE MIAMI, FL 33186		NAC45761
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GREITHER, ELISABETH 14205 SOUTH WEST 119TH AVENUE MIAMI, FL 33186	03/06/0	00645761 7-80002-004 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT V	VRITE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME - STREET ADDRESS CITY-ST-ZIP		and the second s	n na handa an
11. I hereby of indicated limited lia	certify that the information supplied with this filing does not qualify for the ex- on this report is true and accurate and that my signature shall have the sar bility company or the receiver or trustee empowered to execute this report a	emptions contained in Chapter 119, Florida Statute ne legal effect as if made under oath; that I am a m is required by Chapter 608, Florida Statutes.	s. I further certify that the information sanaging member or manager of the