

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 10, 2006 8:00 am
Secretary of State

04-10-2006 90036 035 ****50.00

DOCUMENT # L97000000151

1. Entity Name
ENGELBERG & MILGRIM, P.L.



Principal Place of Business
**3230 STIRLING ROAD
SUITE #1
HOLLYWOOD, FL 33021**

Mailing Address
**3230 STIRLING ROAD
SUITE #1
HOLLYWOOD, FL 33021**

2. Principal Place of Business
**4040 Sheridan Street
Suite, Apt. #, etc.**

3. Mailing Address
**4040 Sheridan Street
Suite, Apt. #, etc.**

City & State
**Hollywood, Florida
Zip 33021 Country USA**

City & State
**Hollywood, Florida
Zip 33021 Country USA**

03272006 Chg-LLC CR2E083 (11/05)

4. FEI Number
65-0731477

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**MILGRIM, LAURIE E
MORRIS ENGELBERG & LAURIE E. MILGRIM
3230 STIRLING ROAD SUITE #1
HOLLYWOOD, FL 33021**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
4040 Sheridan Street
City **Hollywood** FL Zip Code **33021**

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 **Laurie E. Milgrim, Esq.** *Laurie E. Milgrim* **03/27/2006**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE **MGRM** ☐ Delete
NAME **MORRIS ENGELBERG & LAURIE E. MILGRIM, P.A.**
STREET ADDRESS **3230 STIRLING ROAD**
CITY-ST-ZIP **HOLLYWOOD, FL**

TITLE **MGRM** ☐ Delete
NAME **MORRIS, ENGELBERG**
STREET ADDRESS **3230 STIRLING ROAD, SUITE #1**
CITY-ST-ZIP **HOLLYWOOD, FL 33021**

TITLE ☐ Delete
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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **4040 Sheridan Street**
CITY-ST-ZIP **Hollywood, Florida 33021**

TITLE ☒ Change ☐ Addition
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CITY-ST-ZIP **Hollywood, Florida 33021**

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CITY-ST-ZIP

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.

Morris Engelberg & Laurie E. Milgrim, P.A., MGRM

SIGNATURE: By: *Laurie E. Milgrim* **Laurie E. Milgrim** **03/27/2006** **954-966-3900**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #