

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

Feb 23, 2007 08:00 AM  
Secretary of State

DOCUMENT # L97000001071

1. Entity Name  
NSSB NJ, LLC



Principal Place of Business

C/O MARK GINSBERG, CPA  
7775 SOUTHAMPTON TERRACE APT 202  
FORT LAUDERDALE, FL 33321

Mailing Address

C/O MARK GINSBERG, CPA  
7775 SOUTHAMPTON TERRACE APT 202  
TAMARAC, FL 33321



02102007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

59-3491493

Applied For

Not Applicable

5. Certificate of Status Desired



**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

GRAY, N. DWAYNE JR, ESQ  
C/O GREENSPOON, MARDER, ET AL  
135 WEST CENTRAL BLVD., SUITE 1100  
ORLANDO, FL 32801

**DO NOT WRITE  
IN THIS SPACE**

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

**Filing Fee is \$50.00  
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	BROTMAN, HELENE
STREET ADDRESS	212 WIMBLEDON CIRCLE
CITY-ST-ZIP	HEATHROW, FL 32746
TITLE	MGR
NAME	GINSBERG, MARK
STREET ADDRESS	7775 SOUTHAMPTON TERRACE APT 202
CITY-ST-ZIP	TAMARAC, FL 33321
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/06/07-80018-023 55.00

**DO NOT WRITE  
IN THIS SPACE**

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:

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

Mark Ginsberg, Manager

Date

Daytime Phone #

2/10/07