


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 04, 2007 08:00 A
Secretary of State

DOCUMENT # L98000001905 1. Entity Name SEVENTEL, L.C.	
---------------------------------------------------------------------------	-----------------------------------------------------------------------------------

Principal Place of Business 6278 N. FEDERAL HWY., #314 FT. LAUDERDALE, FL 33308	Mailing Address 6278 N. FEDERAL HWY., #314 FT. LAUDERDALE, FL 33308
-----------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------

DO NOT WRITE IN THIS SPACE



04272007No Chg-LLC

CR2E083 (11/05)

4. FEI Number 65-0866321	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> ND	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent ELLIS, W.H. 6278 N. FEDERAL HWY., #314 FT. LAUDERDALE, FL 33308

**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)

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

000000751815
05/25/07-80038-019 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ELLIS, WILLIAM PMB 314, 6278 N. FEDERAL HWY. FT. LAUDERDALE, FL 33308
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ELLIS, NANCY PMB 314, 6278 N. FEDERAL HWY. FT. LAUDERDALE, FL 33308
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**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: WH Ellis William Ellis 5/1/07 305-357-6478
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #