


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 23, 2006 8:00 am
Secretary of State

01-23-2006 90226 008 ****50.00

DOCUMENT # L99000002050	
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1. Entity Name
L & M HOLDINGS LLC

Principal Place of Business
1056 NW 83RD AVE
DAVIE, FL 33322

Mailing Address
1056 NW 83RD AVE
DAVIE, FL 33322



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01182006 Chg-LLC CR2E083 (11/05)

City & State
PLANTATION

City & State
PLANTATION

4. FEI Number
65-0932743

Applied For
Not Applicable

Zip Country

Zip Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HECHT, ALAN R
2670 N.E. 215TH STREET
MIAMI, FL 33180

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, 2006**

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

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGR ☐ Delete
NAME MONTE, NEALE
STREET ADDRESS 1056 NW 83RD AVE
CITY-ST-ZIP FORT LAUDERDALE, FL 33322

TITLE ☒ Change ☐ Addition
NAME **PLANTATION**
STREET ADDRESS
CITY-ST-ZIP

TITLE MGR ☐ Delete
NAME LOWENSTEIN, DARYL
STREET ADDRESS 5428 DUNMORE ROAD
CITY-ST-ZIP WILMINGTON, NC 28409

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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.

SIGNATURE

Date 1/18/06

954-423.9022

14m #

NEALE MONTE