## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # L99000006184**

1. Entity Name 7300 INVESTMENTS, L.L.C.



Principal Place of Business

7301 SW 57 CT STE 440 MIAMI, FL 33143

Mailing Address

7301 SW 57 CT STE 440 2ND FLOOR MIAMI, FL 33143

## FILED May 05, 2008 8:00 am Secretary of State

05-05-2008 90040 031 \*\*\*138.75

60039270



01152008 No Chg-LLC

CR2E083 (12/07)

Daytime Phone #

4. FEI Number		Applied For
65-0966359		Not Applicable
5. Certificate of Status Desired	\$5.00 Additional	

6. Name and Address of Current Registered Agent

MATTAWAY, L. RICHARD 7301 SW 57 CT STE 440 MIAMI, FL 33143

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NA

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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 it applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE	
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75				
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS  MGR  WESTWAY LIMITED, A FLORIDA LIMITED PARTNE 7301 SW 57 CT STE 440  MIAMI, FL 33143	iR		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT.		
NAME STREET ADDRESS CITY-ST-ZIP		IN THIS	SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE 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 empreced to execute this report as required by Chapter 608, Florida Statutes.				

RE OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE