

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 29, 2007 8:00 A
Secretary of State
MAY 14 2007
RECEIVED

DOCUMENT # M02000002391

1. Entity Name
7900 N.W. AVENUE, MM, LLC



Principal Place of Business
C/O URBANAMERICA, L.P.
30 BROAD STREET, 31ST FLOOR
NEW YORK, NY 10004

Mailing Address
C/O URBANAMERICA, L.P.
30 BROAD STREET, 31ST FLOOR
NEW YORK, NY 10004



04202007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
33-1021951

Applied For
Not Applicable

5. Certificate of Status Desired ☒

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

**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
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
URBANAMERICA, L.P.
30 BROAD STREET, 31ST FLOOR
NEW YORK, NY 10004

TITLE
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CITY-ST-ZIP

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U000000765516
06/01/07-80009-011 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

Date

Daytime Phone #

212
5-14-07 612.9100