


# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Feb 01, 2008 8:00 am**  
**Secretary of State**

02-01-2008 90045 017 \*\*\*138.75

<b>DOCUMENT # M03000001508</b>	
1. Entity Name <b>BEACHWAY SHOPPING CENTER 613 LLC</b>	

Principal Place of Business <b>1727 N.W. 38TH AVENUE LAUDERHILL, FL 33311</b>	Mailing Address <b>1727 N.W. 38TH AVENUE LAUDERHILL, FL 33311</b>
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**60005410**



2. Principal Place of Business - No P.O. Box # <b>581-C E Sample Rd</b>	3. Mailing Address <b>P.O. BOX 50127</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

01282008 Chg-LLC CR2E083 (12/06)

City & State <b>Pompano Beach, FL</b>	City & State <b>Lighthouse Point, FL</b>
Zip <b>33064</b>	Zip <b>33074</b>
Country <b>USA</b>	Country <b>USA</b>

4. FEI Number <b>45-1593300</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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6. Name and Address of Current Registered Agent <b>JACOB, MELDUNG 1727 NW 38 AVE. LAUDERHILL, FL 33311</b>	
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7. Name and Address of New Registered Agent Name <b>581-C E Sample Rd</b> Street Address (P.O. Box Number is Not Acceptable) <b>Pompano Beach FL 33064</b> City <b>Pompano Beach FL 33064</b>	
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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  DATE <b>1/29/08</b> <small>Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	
<b>FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75</b>	<b>Make check payable to Florida Department of State</b>

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM MELDUNG HOLDINGS 613, INC. 1727 N.W. 38TH AVENUE LAUDERHILL, FL 33311</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM Meldung Holdings 613, Inc. 581-C E. Sample Rd. Pompano Beach, FL 33064</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM MELDUNG, JACOB 1727 N.W. 38TH AVENUE LAUDERHILL, FL 33311</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM meldung, jacob 581-C E. sample Rd. Pompano Beach, FL 33064</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

<b>SIGNATURE:</b> 	Date	Daytime Phone #
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>		