2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M04000002317

1. Entity Name **BARON 330 LLC**



FILED Apr 16, 2007 08:00 AM Secretary of State

Principal Place of Business

341 EAST 149TH STREET BRONX, NY 10451

Mailing Address

341 EAST 149TH STREET **BRONX, NY 10451**



01182007 No Chg-LLC DO NOT WRITE IN THIS SPACE

CR2E083 (11/05)

4. FEI Number	 Applied For	
NOT APPLICABLE	Not Applicable	
5. Certificate of Status Desired	\$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

LAT PURSER & ASSOCIATES, INC 6320 ST AUGUSTINE RD SUITE 7 JACKSONVILLE, FL 32217

SIGNATURE:

DO NOT WRITE IN THIS SPACE

Date

Daytime Phone #

				<u>·</u>			
The above named entity submits the obligations of registered ager	this statement for the purpose of chant.	iging its registere	d office or registered agent, or both	n, in the State of Florida. Ta	am familiar with, and accept		
SIGNATURE Sonature (voed or printed page	URE						
Filing Fee is \$50.0 Due by May 1, 200	10						
9. MAN	NAGING MEMBERS/MANAGERS			.,			
MGR NAME LEVITES, BARRY STREET ADDRESS 341 EAST 149TH S CITY-ST-ZIP BRONX, NY 1045			<u>.</u>	U000007129	3 66		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP							
I hereby certify that the informat indicated on this report is true a limited liability company or the next that the second	ion supplied with this filling does not on accurate and that my signature signature signature or trustee empowered to execute the supplied to execute the supplied to execute the supplied to execute the supplied to exec	qualify for the exe nall have the sam cute this report a	emptions contained in Chapter 119 le legal effect as if made under oat s required by Chapter 608, Florida	, Florida Statutes. I further h; that I am a managing r Statutes.	certify that the information nember or manager of the		

AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE