


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 09, 2008 08:00 A
Secretary of State

| | |
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| DOCUMENT # M04000003142 |  |
| 1. Entry Name CGT LLC | |

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|--|--|
| Principal Place of Business 1930 HARRISON STREET #404 HOLLYWOOD, FL 33020 | Mailing Address 1930 HARRISON STREET #404 HOLLYWOOD, FL 33020 |
|--|--|



01042008No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

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| 4. FEI Number 20-1018782 | Applied For Not Applicable |
|-----------------------------|-------------------------------|

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

6. Name and Address of Current Registered Agent

EIDELSTEIN, JOEL
 1930 HARRISON STREET
 #404
 HOLLYWOOD, FL 33020

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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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

| 9. MANAGING MEMBERS/MANAGERS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGRM CASTY GRANTOR TRUST #2 1930 HARRISON STREET HOLLYWOOD, FL 33020 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
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U00000777204
 01/09/08-80055-009 138.75

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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: 1/4/08 Daytime Phone #: 305-512-1124

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