### 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

#### DOCUMENT # M04000003212

1. Entity Name IBE FLORIDA 1, LLC



Principal Place of Business

667 MADISON AVENUE C/O IAN BRUCE EICHNER NEW YORK, NY 10021-8029 Mailing Address

667 MADISON AVENUE C/O IAN BRUCE EICHNER NEW YORK, NY 10021-8029

## FILED Feb 23, 2007 8:00 am Secretary of State

02-23-2007 90209 003 \*\*\*\*50.00

20004574



01262007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 73-1696093

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

A1A REGISTERED AGENT INC. 92 SADBERRY ROAD QUINCY, FL 32351

# DO NOT WRITE IN THIS SPACE

ī.	•			
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				
Filling Fee is \$50.00 Due by May 1, 2007				
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM EICHNER, IAN BRUCE 667 MADISON AVENUE NEW YORK, NY 100218029			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				,
1ITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NO	T WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS	SPACE
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TITLE	, 1			<b>.</b>

11. I hereby certify that the information supplied with the 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 first 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 mustee empowered to execute this report as required by Chapter 608, Florida Statutes.

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

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

2/10

702-650-9903

Daytime Phor

Division of Corporations

## 20004574 ATTACHMENT Division of Corporations

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### 2007 Annual Report

Listed below is the most recent information reported for the entity. Please review and click the appropriate button at the bottom to generate the annual report form.

> This information cannot be changed on the report. M04000003212 Document Number Business Entity Name IBE FLORIDA 1, LLC Original File Date 08/11/2004

> > FEI Number

73-1696093

Principal Address 667 MADISON AVENUE C/O IAN BRUCE EICHNER NEW YORK, NY 100218029

Mailing Address

667 MADISON AVENUE C/O IAN BRUCE EICHNER

NEW YORK, NY 100218029

Registered Agent

A1A REGISTERED AGENT INC.

92 SADBERRY ROAD QUINCY, FL 32351 US

Managing Member/Manager Name And Address

**MGRM** IAN BRUCE EICHNER 667 MADISON AVENUE NEW YORK, NY 100218029

If all of the above information is correct and you do not wish to make any changes, please select:

No Changes

If you need to make changes to the above information, please select:

Make Changes

Sunbiz Home Page

Help