

2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT

FILED
Feb 27, 2008 08:00 AM
Secretary of State

DOCUMENT # M06000001905

1. Entity Name
PASSEN ENTERPRISES, LLC



Principal Place of Business
2019 SW 20TH STREET, STE. 108
FT. LAUDERDALE, FL 33315

Mailing Address
2019 SW 20TH STREET, STE. 108
FT. LAUDERDALE, FL 33315



01072008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-3026574

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

SCHNEIDER, WALTER B
1401 E. BROWARD BLVD., STE. 200
FORT LAUDERDALE, FL 33301

**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 _____

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

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME PASSEN, SELVIN M.D.
STREET ADDRESS 2019 SW 20TH STREET, STE. 108
CITY-ST-ZIP FT. LAUDERDALE, FL 33315

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U00000841632
03/10/08-80024-021 138.75

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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

1/30/08

Date

954-713-0341

Daytime Phone #