

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000005253

Entity Name: REFKIN & REFKIN, LLC

FILED  
Jan 23, 2008  
Secretary of State

## Current Principal Place of Business:

16300 GOLF CLUB ROAD  
#801  
WESTON, FL 33326

## New Principal Place of Business:

## Current Mailing Address:

16300 GOLF CLUB ROAD  
#801  
WESTON, FL 33326

## New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

REFKIN, BEVERLY  
16300 GOLF CLUB ROAD  
#801  
WESTON, FL 33326 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: REFKIN, PAUL  
Address: 1236 NE 15TH AVE.  
City-St-Zip: FT. LAUDERDALE, FL 33304

Title: MGR ( ) Delete  
Name: REFKIN, BEVERLY  
Address: 1236 NE 15TH AVE.  
City-St-Zip: FT. LAUDERDALE, FL 33304

Title: MGR ( ) Delete  
Name: REFKIN, ROBYN J  
Address: 8030 CLEARY COURT  
City-St-Zip: PLANTATION, FL 33324

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: BEVERLY REFKIN BY V.HAWK AS ATTY-IN-FACT MGR 01/23/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date