## 2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

## **DOCUMENT # M07000004726**

1. Entity Name

1998 CRYSTAL BROOK, L.L.C.



Principal Place of Business

3235 ROUTE 112

SUITE 1

MEDFORD, NY 11763

Mailing Address

3235 ROUTE 112

SUITE 1

DO NOT WRITE IN THIS SPACE

MEDFORD, NY 11763

## **FILED** Mar 05, 2008 8:00 am Secretary of State

03-05-2008 90331 001 \*\*\*277.50

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02182008 No Chg-LLC

CR2E083 (12/07)

631-908-0033

| ٠. | 4. FEI Number                    | Applied For       |  |
|----|----------------------------------|-------------------|--|
| ì  | 11-3476688                       | Not Applicable    |  |
|    | 5. Certificate of Status Desired | \$5.00 Additional |  |

6. Name and Address of Current Registered Agent

COSTA, THOMAS LESQ 8517 EGRET MEADOW LANE WEST PALM BEACH, FL 33412

**SIGNATURE:** 

## DO NOT WRI IN THIS SPACE

| SIGNATURE.  | Signature, typed or printed name of registered agent and little if applicable. | (NOTE: Registered Agent signature required when reinstating)   | DATE   |  |
|---|--|--|--|--|
| FILE<br>After May   | NOW!!! FEE IS \$138.75<br>/ 1, 2008 Fee will be \$538.75                       |  |  |  |
| 9.  | MANAGING MEMBERS/MANAGERS  | · · · · · · · · · · · · · · · · · · ·  |  |  |
| TITLE   | MGRM   |  |  |  |
| NAME  | ELLIOTT, PAUL  |  |  |  |
| STREET ADDRESS  | 3235 ROUTE 112   |  |  |  |
| CITY-ST-ZIP   | MEDFORD, NY 11763  |  |  |  |
| TITLE   |  |  |  |  |
| NAME  |  |  |  |  |
| STREET ADDRESS  |  |  |  |  |
| CITY-ST-ZIP   |  |  |  |  |
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| NAME<br>STREET ADDRESS  |  |  |  |  |
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| TITLE<br>NAME   |  |  |  |  |
| STREET ADDRESS  |  |  |  |  |
| CITY-ST-ZIP   |  | The first terms to be a fine of the state of |  |  |
| TITLE   |  |  |  |  |
| NAME  | •  |  | Table 1  |  |
| STREET ADDRESS  | **   | The solution of the factor of the solution of  | the state of the s |  |
| CITY-ST-ZIP   |  |  | A STATE OF THE STA |  |
| 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 ray 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. |  |  |  |  |

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