


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT


FILED
Apr 07, 2008 08:00 AM
Secretary of State

DOCUMENT # M98000000377
 1. Entity Name
 WEINRIB/COLE REAL ESTATE LLC



Principal Place of Business: 15 EAST NORTH STREET DOVER, DE 19901
 Mailing Address: 15 EAST NORTH STREET DOVER, DE 19901

DO NOT WRITE IN THIS SPACE



04022008 No Chg-LLC CR2E083 (12/07)
 4. FEI Number: 52-2080438 Applied For: Not Applicable
 5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
 WEINRIB, JEROME
 777 SOUTH CONGRESS AVENUE
 DELRAY BEACH, FL 33445

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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

00000886903
 04/16/08-80029-016 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	WEINRIB, JEROME
STREET ADDRESS	777 SOUTH CONGRESS AVENUE
CITY-ST-ZIP	DELRAY BEACH, FL 33445
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: J. Weinrib 4/2/08 212 473-3000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #