

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000001834

Entity Name: FONTAINEBLEAU II 1609, LLC

FILED  
Apr 16, 2009  
Secretary of State

**Current Principal Place of Business:**

4441 COLLINS AVENUE  
1609  
MIAMI BEACH, FL 33140

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 220236  
GREAT NECK, NY 11020

**New Mailing Address:**

FEI Number: 20-0811283

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PESTCOE, SCOTT L  
% STONE & PESTCOE, P.A./WESTSIDE CORP CTR  
150 SOUTH PINE ISLAND ROAD, SUITE 540  
PLANTATION, FL 33324 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: KANDOV, MICHAEL  
Address: PO BOX 220236  
City-St-Zip: GREAT NECK, NY 11022

**ADDITIONS/CHANGES:**

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: MICHAEL KANDOV

MEMB

04/16/2009

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