

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000004294

FILED
Mar 24, 2009
Secretary of State

Entity Name: PALM BEACH INTERNATIONAL REALTY, LLC

Current Principal Place of Business:

13412 57TH PLACE S
WELLINGTON, FL 33467

New Principal Place of Business:

13412 57TH PLACE S
WELLINGTON, FL 33449

Current Mailing Address:

13412 57TH PLACE S
WELLINGTON, FL 33467

New Mailing Address:

13412 57TH PLACE S
WELLINGTON, FL 33449

FEI Number: 33-1047220

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOET, FRANKLIN T
13412 57TH PLACE S.
WELLINGTON, FL 33467 US

Name and Address of New Registered Agent:

HOET, FRANKLIN T
13412 57TH PLACE S.
WELLINGTON, FL 33449 US

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: FRANKLIN HOET

03/24/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: HOET, FRANKLIN T
Address: 13412 57TH PLACE S
City-St-Zip: WELLINGTON, FL 33467

Title: MGR () Delete
Name: HOET, FRANKLIN D
Address: 13349 60TH ST SOUTH
City-St-Zip: WELLINGTON, FL 33467

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: HOET, FRANKLIN D
Address: 13349 60TH ST SOUTH
City-St-Zip: WELLINGTON, FL 33449

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: FRANKLIN HOET

MGR

03/24/2009

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