

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000021371

Entity Name: SHARM MANAGEMENT, LLC

FILED
Mar 07, 2009
Secretary of State

Current Principal Place of Business:

ATTN: HOWARD W. WALLACH
9642 S.W. 69 PLACE
MIAMI, FL 33156

New Principal Place of Business:

Current Mailing Address:

ATTN: HOWARD W. WALLACH
9642 S.W. 69 PLACE
MIAMI, FL 33156

New Mailing Address:

FEI Number: 06-1720227

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALLACH, HOWARD W
9642 S.W. 69 PLACE
MIAMI, FL 33156 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: P () Delete
Name: WALLACH, HOWARD
Address: 9642 SOUTHWEST 69 PLACE
City-St-Zip: MIAMI, FL 33156

Title: V () Delete
Name: WALLACH, SUZANNE
Address: 9642 SOUTHWEST 69 PLACE
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES:

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

Title: V (X) Change () Addition
Name: WALLACH, SUZANNE
Address: 9642 SOUTHWEST 69 PLACE
City-St-Zip: MIAMI, FL 33156 US

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: HOWARD WALLACH

P

03/07/2009

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