

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000048972

**FILED**  
**Apr 30, 2009**  
**Secretary of State**

**Entity Name:** 1055 NE 125, L.L.C.

**Current Principal Place of Business:**

1055 NE 125 ST  
NORTH MIAMI, FL 33161

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 546752  
SURFSIDE, FL 33154

**New Mailing Address:**

**FEI Number:** 20-2262139

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MICHAEL I. BERNSTEIN, P.A.  
1688 MERIDIAN AVE  
SUITE 418  
MIAMI BEACH, FL 33139 US

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

MILLENNIUM MANAGEMENT  
10800 BISCAYNE BLVD  
SUITE 600  
MIAMI, FL 33161 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: MILLENNIUM MANAGEMENT

04/30/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SHAULSON, ABRAHAM  
Address: 1055 NE 125 ST  
City-St-Zip: NORTH MIAMI, FL 33161

Title: V.P. ( ) Delete  
Name: KLEIN, AVI  
Address: 1055 NE 125 ST  
City-St-Zip: NORTH MIAMI, FL 33161

**ADDITIONS/CHANGES:**

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

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: SHAULSON ABRAHAM

MGRM

04/30/2009

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