

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000035652

**FILED**  
**Jun 19, 2009**  
**Secretary of State**

**Entity Name:** OCC PARTNERS LLC

**Current Principal Place of Business:**

2799 NW BOCA RATON BLVD STE 203  
BOCA RATON, FL 33431

**New Principal Place of Business:**

9100 SOUTH DADELAND BOULEVARD  
SUITE 910  
MIAMI, FL 33156

**Current Mailing Address:**

2799 NW BOCA RATON BLVD STE 203  
BOCA RATON, FL 33431

**New Mailing Address:**

9100 SOUTH DADELAND BOULEVARD  
SUITE 910  
MIAMI, FL 33156

**FEI Number:** 20-8797620      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

SCIARRETTA, STEVEN A  
2799 NW BOCA RATON BLVD STE 203  
BOCA RATON, FL 33431      US

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

GRUBER, PETER G ESQUIRE  
9100 SOUTH DADELAND BOULEVARD  
SUITE 910  
MIAMI, FL 33156 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: PETER G. GRUBER, ESQUIRE

06/19/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: SCIARRETTA, STEVEN A  
Address: 2799 NW BOCA RATON BLVD STE 203  
City-St-Zip: BOCA RATON, FL 33431

**ADDITIONS/CHANGES:**

Title: MGR      (X) Change      ( ) Addition  
Name: POLICASTRO, ARLETTE  
Address: 9100 SOUTH DADELAND BOULEVARD, SUITE 910  
City-St-Zip: MIAMI, FL 33156

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: ARLETTE POLICASTRO

MGR

06/19/2009

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