

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000093295

Entity Name: 2PR PROPERTIES, LLC

FILED  
Apr 23, 2009  
Secretary of State

**Current Principal Place of Business:**

4802 SW 51ST STREET  
DAVIE, FL 33314

**New Principal Place of Business:**

**Current Mailing Address:**

1719 HARBOR VIEW CIRCLE  
WESTON, FL 33327

**New Mailing Address:**

FEI Number: 26-0899450

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SANCHEZ, LUIS F  
1719 HARBOR VIEW CIRCLE  
WESTON, FL 33327 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: MR ( ) Delete  
Name: SANCHEZ, LUIS F  
Address: 1719 HARBOR VIEW CIRCLE  
City-St-Zip: WESTON, FL 33327

Title: MR ( ) Delete  
Name: BOU, FRANK A  
Address: 3952 WEST GARDENIA AVENUE  
City-St-Zip: WESTON, FL 33332

**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: FRANK BOU

MBR

04/23/2009

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