

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000094706

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

**Entity Name:** GOLLI LLC

**Current Principal Place of Business:**

1521 ALTON RD.  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

1521 ALTON RD.  
#180  
MIAMI BEACH, FL 33139 US

**Current Mailing Address:**

1521 ALTON RD.  
MIAMI BEACH, FL 33139

**New Mailing Address:**

1521 ALTON RD.  
#180  
MIAMI BEACH, FL 33139 US

**FEI Number:** 68-0659547

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GLAESER, OLIVER  
1521 ALTON RD.  
MIAMI BEACH, FL 33139 US

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

GLAESER, OLIVER  
1521 ALTON RD.  
#180  
MIAMI BEACH, FL 33139 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: \_\_\_\_\_

04/30/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: GLASER, OLIVER  
Address: 1521 ALTON RD.  
City-St-Zip: MIAMI BEACH, FL 33139

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: GLASER, OLIVER  
Address: 1521 ALTON RD.  
City-St-Zip: MIAMI BEACH, FL 33139 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: OLIVER GLAESER

MGRM

04/30/2009

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