

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000002717

**FILED**  
**Jan 12, 2010**  
**Secretary of State**

**Entity Name:** 6751 NORTH UNIVERSITY, LLC

**Current Principal Place of Business:**

93 DAVIES AVENUE  
DUMONT, NJ 07628

**New Principal Place of Business:**

**Current Mailing Address:**

93 DAVIES AVENUE  
DUMONT, NJ 07628

**New Mailing Address:**

**FEI Number:** 26-2241018

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEV, ELLEN  
6751 N. UNIVERSITY DRIVE, APT. 318  
BUILDING 6  
TAMARAC, FL 33321 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:** MGR  
**Name:** MOSKOWITZ, BARBARA  
**Address:** 93 DAVIES AVENUE  
**City-St-Zip:** DUMONT, NJ 07628

**Title:** MGR  
**Name:** DIM, JUDYTHE  
**Address:** 219 WEST 81ST STREET, APT 10F  
**City-St-Zip:** NEW YORK, NY 10024

I hereby 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: BARBARA MOSKOWITZ

MGR.

01/12/2010

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