

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000060192

FILED  
Apr 21, 2011  
Secretary of State

**Entity Name:** LARRYTOWN HOLDINGS CORP.

**Current Principal Place of Business:**

1500 SAN REMO AVE SUITE 125  
CORAL GABLES, FL 33146

**New Principal Place of Business:**

**Current Mailing Address:**

1500 SAN REMO AVE SUITE 125  
CORAL GABLES, FL 33146

**New Mailing Address:**

FEI Number: 98-0231941

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ATRIUM REGISTERED AGENTS, INC.  
1500 SAN REMO AVE SUITE 125  
CORAL GABLES, FL 33146 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

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: LINDENFELD, MAXIMILIAN  
Address: 1500 SAN REMO AVE SUITE 125  
City-St-Zip: CORAL GABLES, FL 33146

Title: VP  
Name: LINDENFELD, DANYA  
Address: 169 E FLAGLER SUITE 1600  
City-St-Zip: MIAMI, FL 33131

Title: S  
Name: BENHAMRON, URI  
Address: 169 E FLAGLER SUITE 1600  
City-St-Zip: MIAMI, FL 33131

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MAXIMILIAN LINDENFELD

DP

04/21/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date