

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000093369

Entity Name: PROFESSIONE CASA, LLC.

FILED  
Feb 03, 2009  
Secretary of State

## Current Principal Place of Business:

3201 NE 183 ST #2708  
AVENTURA, FL 33160

## New Principal Place of Business:

6065 NW 167 STREET  
B-13  
MIAMI, FL 33015 US

## Current Mailing Address:

3201 NE 183 ST #2708  
AVENTURA, FL 33160

## New Mailing Address:

6065 NW 167 STREET  
B-13  
MIAMI, FL 33015 US

FEI Number: 20-5642116

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NICASTRO, MASSIMO  
3201 NE 183 ST #2708  
AVENTURA, FL 33160 US

## Name and Address of New Registered Agent:

NICASTRO, MASSIMO  
6065 NW 167 STREET  
B-13  
MIAMI, FL 33015 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: MASSIMO NICASTRO

02/03/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: NICASTRO, MASSIMO  
Address: 3201 NE 183 ST #2708  
City-St-Zip: AVENTURA, FL 33160

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: NICASTRO, MASSIMO  
Address: 6065 NW 167 STREET B-13  
City-St-Zip: MIAMI, FL 33015 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: MASSIMO NICASTRO

MGR

02/03/2009

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