

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000117841

Entity Name: SOUTH FLORALS DC, LLC

FILED  
Feb 21, 2009  
Secretary of State

**Current Principal Place of Business:**

8200 NW 30TH TERRACE  
DORAL, FL 33122 US

**New Principal Place of Business:**

**Current Mailing Address:**

8200 NW 30TH TERRACE  
DORAL, FL 33122 US

**New Mailing Address:**

FEI Number: 20-8044557

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NORIEGA, SAMUEL D  
8200 NW 30TH TERRACE  
DORAL, FL 33122 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: MGRM ( ) Delete  
Name: NORIEGA, SAMUEL D  
Address: 8200 NW 30TH TERRACE  
City-St-Zip: DORAL, FL 33122 US

Title: MGRM ( ) Delete  
Name: SANCHEZ, DANIEL L  
Address: 8200 NW 30TH TERRACE  
City-St-Zip: DORAL, FL 33122 US

**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: SAMUEL NORIEGA

MGRM

02/21/2009

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