2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 18, 2009
Secretary of State

DOCUMENT# L00000002453

Entity Name: 3200 NORTH MIAMI AVENUE, LLC

Current Principal Place of Business:

1577 MAINER WAY
HOLLYWOOD, FL 33019

New Principal Place of Business:

1577 MARINER WAY
HOLLYWOOD, FL 33019

Current Mailing Address:

1577 MAINER WAY
HOLLYWOOD, FL 33019

New Mailing Address:

1577 MARINER WAY
HOLLYWOOD, FL 33019

FEI Number: 65-0987513 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GALUSTYANTS, BELLA
1577 MAINER WAY
HOLLYWOOD, FL 33019 US

Name and Address of New Registered Agent:

GALUSTYANTS, BELLA
1577 MARINER WAY
HOLLYWOOD, FL 33019 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: BELLA GALUSTYANTS 03/18/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: GALUSTYANTS, BELLA
Address: 1577 MAINER WAY
City-St-Zip: HOLLYWOOD, FL 33019

Title: MGRM ( ) Delete
Name: BOULMAROUF, NAZIHA
Address: 22 SARATOGA DRIVE
City-St-Zip: JERICHO, NY 11753

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: GALUSTYANTS, BELLA
Address: 1577 MARINER WAY
City-St-Zip: HOLLYWOOD, FL 33019

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: BELLA GALUSTYANTS MGRM 03/18/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date