2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000020764

Entity Name: SURFSIDE BEACH HOTEL MANAGEMENT, LLC

FILED May 01, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4833 COLLINS AVE, STUIE 1714 4835 COLLINS AVE, MIAMI BEACH, FL 33140 MIAMI BEACH, FL 33140

Current Mailing Address: New Mailing Address:

P.O. BOX 140888 P.O. BOX 140668

CORAL GABLES, FL 331140888 CORAL GABLES, FL 331140668

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

M.J.F. REGISTERED AGENT CORP. 153 SEVILLA AVENUE CORAL GABLES, FL 33134 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:

Electronic Signature of Registered Agent Date

Electronic eignature of registered rige

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: MURRAY, JACQUES G Name: MURRAY, JACQUES G

Name: MURRAY, JACQUES G Name: MURRAY, JACQUES G
Address: % 4838 COLLINS AVENUE, STE. 1714 Address: 11 RUE DU THEATRE

City-St-Zip: MIAMI BEACH, FL 33140 City-St-Zip: MONTREUX 1820 SWITZERLAND, CH

Title: VP (X) Delete Title: () Change () Addition

Name: KING, RANDALL Name:

Address: % 4838 COLLINS AVENUE, STE. 1714 Address: City-St-Zip: MIAMI BEACH, FL 33140 City-St-Zip:

Title: VP (X) Delete Title: () Change () Addition Name: SIMMONDS, JOEL L Name:

 Address:
 % 4838 COLLINS AVENUE, STE. 1714
 Address:

 City-St-Zip:
 MIAMI BEACH, FL 33140
 City-St-Zip:

Title: ST () Delete Title: MG (X) Change () Addition

Name: LEON, MARIÈ CLAIRE Name: LEON, MARIÈ CLAIRE

Address: % 4838 COLLINS AVENUE, STE. 1714 Address: 1017 NORTH BEVERLY DRIVE City-St-Zip: MIAMI BEACH, FL 33140 City-St-Zip: BEVERLY HILLS, CA 90210

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: JACQUES G MURRAY MGRM 05/01/2009