

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000003247

**FILED**  
**Apr 22, 2009**  
**Secretary of State**

**Entity Name:** DEZER PROPERTIES 146 LLC

**Current Principal Place of Business:**

18001 COLLINS AVENUE, 31ST FLOOR  
SUNNY ISLES BEACH, FL 33160

**New Principal Place of Business:**

89 FIFTH AVENUE  
11TH FLOOR  
NEW YORK, NY 10003

**Current Mailing Address:**

18001 COLLINS AVENUE, 31ST FLOOR  
SUNNY ISLES BEACH, FL 33160

**New Mailing Address:**

89 FIFTH AVENUE  
11TH FLOOR  
NEW YORK, NY 10003

**FEI Number:** 13-3848771

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FIELDSTONE, RONALD R  
201 ALHAMBRA CIRCLE, SUITE 601  
CORAL GABLES, FL 33134 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: DEZER, MICHAEL  
Address: 8701 COLLINS AVENUE  
City-St-Zip: MIAMI BEACH, FL 33154

Title: MGRM ( ) Delete  
Name: DEZERTZOV, NEOMI  
Address: 8701 COLLINS AVENUE  
City-St-Zip: MIAMI BEACH, FL 33154

**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:** MICHAEL DEZER

MR.

04/22/2009

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