### I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.

Μ

SIGNATURE: SHLOMO SIAMA

Electronic Signature of Signing Authorized Person(s) Detail

Name and Address of Current Registered Agent:

SIAMA, SHLOMO 500 BAYVIEW DR., SUITE 430 SUNNY ISLES, FL 33160 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

#### Authorized Person(s) Detail :

Title	MGRM	Title	MGRM
Name	SPERLING, BENJIE	Name	SIAMA, SHLOMO
Address	P.O. BOX 7058	Address	500 BAYVIEW DRIVE #430
City-State-Zip:	HOLLYWOOD FL 33081	City-State-Zip:	SUNNY ISLES FL 33160

# Certificate of Status Desired: No

03/09/2013 Date

#### FILED Mar 09, 2013 Secretary of State CC3152548392

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L05000047673

Entity Name: 2401 PEMBROKE ROAD, LLC

#### **Current Principal Place of Business:**

3661 N.47 AVENUE HOLLYWOOD, FL 33021

#### **Current Mailing Address:**

500 BAYVIEW DR., SUITE 430 SUNNY ISLES. FL 33160

## FEI Number: 20-2872520

Date