

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000007230

Entity Name: 2241 NORTH, LLC

FILED  
Jan 07, 2009  
Secretary of State

**Current Principal Place of Business:**

PO BOX 840638  
HOLLYWOOD, FL 33084

**New Principal Place of Business:**

2295 N UNIVERSITY DRIVE  
PEMBROKE PINES, FL 33024

**Current Mailing Address:**

PO BOX 840638  
HOLLYWOOD, FL 33084

**New Mailing Address:**

FEI Number: 65-1017631

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SMETS, MICHAEL  
3736 SARATOGA LN  
DAVIE, FL 33328 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: P ( ) Delete  
Name: SMETS, MICHAEL A  
Address: 3736 SARATOGA LN  
City-St-Zip: DAVIE, FL 33328

Title: V ( ) Delete  
Name: GONZALEZ, MANUEL  
Address: 6101 SW 183 WAY  
City-St-Zip: FT. LAUDERDALE, FL 33331

**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 A. SMETS

P

01/07/2009

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