

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000012359

Entity Name: PINECREST PLAZA, LLC

FILED
Jul 07, 2008
Secretary of State

Current Principal Place of Business:

% JAY GOTTLIEB
9100 S. DADELAND BLVD., SUITE 504
MIAMI, FL 33156 US

Current Mailing Address:

% JAY GOTTLIEB
9100 S. DADELAND BLVD., SUITE 504
MIAMI, FL 33156 US

New Principal Place of Business:

% JAY GOTTLIEB
9500 S. DADELAND BLVD., SUITE 708
MIAMI, FL 33156 US

New Mailing Address:

% JAY GOTTLIEB
9500 S. DADELAND BLVD., SUITE 708
MIAMI, FL 33156 US

FEI Number: 65-1046546 FEI Number Applied For () FEI Number Not Applicable () 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:

SIMON, GARY P
9100 S. DADELAND BLVD., SUITE 504
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

SIMON, GARY P
9500 S. DADELAND BLVD., SUITE 708
MIAMI, FL 33156 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:

07/07/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GOTTLIEB, JAY
Address: 9100 S. DADELAND BLVD., SUITE 504
City-St-Zip: MIAMI, FL 33156 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GOTTLIEB, JAY
Address: 9500 S. DADELAND BLVD., SUITE 708
City-St-Zip: MIAMI, FL 33156 US

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: JAY GOTTLIEB

MGR

07/07/2008

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