

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000009811

FILED  
Mar 21, 2009  
Secretary of State

Entity Name: THE SHOPPES AT 41ST STREET LLC

**Current Principal Place of Business:**

C/O AMOS SHOSHAN  
18350 N.E. 30 PLACE  
AVENTURA, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

C/O AMOS SHOSHAN  
18350 N.E. 30 PLACE  
AVENTURA, FL 33160

**New Mailing Address:**

FEI Number: 65-1119904

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MARCUS, ALAN J  
SUITE 301  
20803 BISCAYNE BOULEVARD  
AVENTURA, FL 33180 US

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

MARCUS, ALAN J  
20803 BISCAYNE BOULEVARD  
SUITE 301  
AVENTURA, FL 33180 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:

03/21/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: THE SHOPPES AT 41ST, STREET, INC.  
Address: 18350 N.E. 30 PLACE  
City-St-Zip: AVENTURA, FL 33160

Title: MGRM ( ) Delete  
Name: SHOSHAN, ADIR  
Address: 3500 MYSTIC POINTE DRIVE, UNIT 3706  
City-St-Zip: AVENTURA, FL 33180

Title: MGRM ( ) Delete  
Name: SHOSHAN, AMOS  
Address: 3500 MYSTIC POINTE DRIVE, UNIT 3706  
City-St-Zip: AVENTURA, FL 33180

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: AMOS SHOSHAN

MGRM

03/21/2009

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