

**2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Apr 30, 2005  
Secretary of State**

DOCUMENT# L01000018888

Entity Name: FENDLER-LEIBOVITCH, LLC

**Current Principal Place of Business:**

141 ARAGON AVENUE  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

7600 SW 171ST STREET  
VILLAGE OF PALMETTO BAY, FL 33157

**Current Mailing Address:**

P.O. BOX 14-4262  
CORAL GABLES, FL 331144262

**New Mailing Address:**

FEI Number: 65-1151498      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

LEIBOVITCH, JACQUES Y  
7600 S.W. 171ST STREET  
VILLAGE OF PALMETTO BAY, FL 33157      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/MEMBERS:**

Title: MGR      ( ) Delete  
Name: LEIBOVITCH, JACQUES Y  
Address: 7600 S.W. 171ST STREET  
City-St-Zip: PALMETTO BAY, FL 33157

Title: MGR      ( ) Delete  
Name: LEIBOVITCH, CAROLE FENDLER  
Address: 7600 S.W. 171ST STREET  
City-St-Zip: PALMETTO BAY, FL 33157

**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 for the exemption stated in Section 119.07(3)(i), 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: JACQUES Y LEIBOVITCH

MGR

04/30/2005

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