

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000018888

FILED
Apr 28, 2009
Secretary of State

Entity Name: FENDLER-LEIBOVITCH, LLC

Current Principal Place of Business:

33 SALAMANCA AVENUE # 12
CORAL GABLES, FL 33134

New Principal Place of Business:

533 CORAL WAY #16
CORAL GABLES, FL 33134

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 ()

Name and Address of Current Registered Agent:

LEIBOVITCH, JACQUES Y
33 SALAMANCA AVENUE #12
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

LEIBOVITCH, JACQUES Y
533 CORAL WAY #16
CORAL GABLES, FL 33134 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: _____

04/28/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: LEIBOVITCH, JACQUES Y
Address: PO BOX 14-4262
City-St-Zip: CORAL GABLES, FL 331144262

Title: MGR () Delete
Name: LEIBOVITCH, CAROLE FENDLER
Address: PO BOX 14-4262
City-St-Zip: CORAL GABLES, FL 331144262

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: CAROLE FENDLER LEIBOVITCH

MGRM

04/28/2009

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