

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000004892

FILED  
Mar 02, 2011  
Secretary of State

**Entity Name:** SOLOMON-KALBACK NORTH BLDG., LLC

**Current Principal Place of Business:**

1690 WACHOVIA FINANCIAL CENTER  
200 SOUTH BISCAYNE BOULEVARD  
MIAMI, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

1690 WACHOVIA FINANCIAL CENTER  
200 SOUTH BISCAYNE BOULEVARD  
MIAMI, FL 33131

**New Mailing Address:**

**FEI Number:** 59-6145065

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BROOKS C. MILLER, PA  
1690 WACHOVIA FINANCIAL CENTER  
200 SOUTH BISCAYNE BOULEVARD  
MIAMI, FL 331303313 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: MGR  
Name: SOLOMON, DAVID S  
Address: 148 HIGH LAKE DRIVE  
City-St-Zip: WARD, CO 80481 US

Title: MGR  
Name: KALBACK, RICHARD  
Address: 1950 SE 143RD COURT  
City-St-Zip: MORRISTON, FL 32668

Title: MGR  
Name: LUMANNICK, MARY  
Address: 11770 SW 29TH STREET  
City-St-Zip: MIAMI, FL 33175

I hereby 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: DAVID SOLOMON

MGR

03/02/2011

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