

**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000016587

**FILED**  
**Apr 14, 2008**  
**Secretary of State**

**Entity Name:** THE SHOPPES OF IBIS, LLC

**Current Principal Place of Business:**

1600 NE MIAMI GARDENS DR  
NORTH MIAMI BEACH, FL 33179

**New Principal Place of Business:**

**Current Mailing Address:**

1600 NE MIAMI GARDENS DR  
NORTH MIAMI BEACH, FL 33179

**New Mailing Address:**

**FEI Number:** 04-3695613      **FEI Number Applied For** ( )      **FEI Number Not Applicable** ( )      **Certificate of Status Desired** ( )

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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       Delete  
Name: KATZMAN, CHAIM  
Address: 1600 NE MIAMI GARDENS DRIVE  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: MGR       Delete  
Name: OLSON, JEFFREY S  
Address: 1600 NE MIAMI GARDENS DRIVE  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

**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: JEFFREY S. OLSON

MGR

04/14/2008

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