

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000021301

Entity Name: ALSIMOMA, LLC

**FILED**  
**Apr 01, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1615 FORUM PLACE  
STE. 3A, BARRISTERS BLDG.  
WEST PALM BEACH, FL 33401

**New Principal Place of Business:**

**Current Mailing Address:**

1615 FORUM PLACE  
STE. 3A, BARRISTERS BLDG.  
WEST PALM BEACH, FL 33401

**New Mailing Address:**

FEI Number: 43-1972046

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LEVY, ROBERT S  
1615 FORUM PLACE  
STE. 3A, BARRISTERS BLDG.  
WEST PALM BEACH, FL 33401 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: MGRM  
Name: LEVY, ROBERT S  
Address: 1615 FORUM PLACE, STE. 3A  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: MGRM  
Name: LEVY, CEIL N  
Address: 1615 FORUM PL STE 3A  
City-St-Zip: WEST PALM BEACH, FL 33401

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: ROBERT S. LEVY

MGR

04/01/2011

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