

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000003899

FILED  
Feb 11, 2009  
Secretary of State

Entity Name: SCHORIG HOLDINGS, LLC

## Current Principal Place of Business:

2110 N. OCEAN BLVD., #2303  
FT. LAUDERDALE, FL 33305

## New Principal Place of Business:

2110 N. OCEAN BLVD.  
APT. 2303  
FT. LAUDERDALE, FL 33305

## Current Mailing Address:

2110 N. OCEAN BLVD., #2303  
FT. LAUDERDALE, FL 33305

## New Mailing Address:

2110 N. OCEAN BLVD.  
APT. 2303  
FT. LAUDERDALE, FL 33305

FEI Number: 90-0085611

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VEREBAY, LAYNE ESQ.  
888 SE 3RD AVENUE, SUITE 400  
FT. LAUDERDALE, FL 33316 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 ( ) Delete  
Name: SCHOOLMAN, WILLIAM  
Address: 2110 N. OCEAN BLVD., #2303  
City-St-Zip: FT. LAUDERDALE, FL 33305

Title: MGRM ( ) Delete  
Name: RIGGI, MARCIA  
Address: 3201 NORTHEAST 183RD STREET #1705  
City-St-Zip: AVENTURA, FL 33160

## 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: WILLIAM D. SCHOOLMAN

MGRM

02/11/2009

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