

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000023324

FILED  
Apr 20, 2011  
Secretary of State

Entity Name: DOMUS INVESTMENT GROUP, L.L.C.

## Current Principal Place of Business:

1180 E HALLANDALE BEACH BLVD.  
A  
HALLANDALE BEACH, FL 33009

## New Principal Place of Business:

400 S. DIXIE HWY.  
9  
HALLANDALE BEACH, FL 33009

## Current Mailing Address:

1180 E HALLANDALE BEACH BLVD.  
A  
HALLANDALE BEACH, FL 33009

## New Mailing Address:

400 S. DIXIE HWY.  
9  
HALLANDALE BEACH, FL 33009

FEI Number: 42-1597700

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

YECUTIELI, SAMUEL E  
1180 E HALLANDALE BEACH BLVD.  
A  
HALLANDALE BEACH, FL 33009 US

## Name and Address of New Registered Agent:

YECUTIELI, SAMUEL E  
400 S. DIXIE HWY.  
9  
HALLANDALE BEACH, FL 33009 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:

04/20/2011

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM  
Name: MENDEL, ERVIN A  
Address: 400 S. DIXIE HWY.  
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: MGRM  
Name: YECUTIELI, SAMUEL E  
Address: 400 S. DIXIE HWY.  
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: MGRM  
Name: PEICHER, LEO M  
Address: 400 S. DIXIE HWY.  
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: MGRM  
Name: JAEGERMAN, ARTURO M  
Address: 400 S. DIXIE HWY.  
City-St-Zip: HALLANDALE BEACH, FL 33009

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: ERVIN MENDEL

MGRM

04/20/2011

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