

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000027898

Entity Name: NORTHEAST 40TH, LLC

FILED
Jul 15, 2008
Secretary of State

Current Principal Place of Business:

40 NE 40 STREET
MIAMI, FL 33137 US

New Principal Place of Business:

Current Mailing Address:

40 NE 40 STREET
MIAMI, FL 33137 US

New Mailing Address:

FEI Number: 11-3701121 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: P () Delete
Name: SANS, ARIEL D
Address: 12 LITTLE POND
City-St-Zip: POINT MANALAPAN, FL 33462

Title: VP () Delete
Name: SANS, ALEJANDRO D
Address: 1523 CONSOLAGA AVE
City-St-Zip: CORA GABLES, FL 33406

Title: S () Delete
Name: MOTZEL, VINCENT C
Address: 12 LITTLE POND
City-St-Zip: POINT MANALAPAN, FL 33462

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ALEJANDRO D SANS

VP

07/15/2008

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