

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000010796

Entity Name: NAKAVA, LLC

FILED
Feb 26, 2009
Secretary of State

Current Principal Place of Business:

2200 N.W. 2ND AVE.
SUITE 127
BOCA RATON, FL 33431

New Principal Place of Business:

1723 AVENIDA DEL SOL
BOCA RATON, FL 33432

Current Mailing Address:

2200 N.W. 2ND AVE.
SUITE 127
BOCA RATON, FL 33431

New Mailing Address:

140 NW 20TH STREET
BOCA RATON, FL 33431

FEI Number: 20-0656345

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOUTH PACIFIC ELIXIR COMPANY
140 NW 20TH STREET
BOCA RATON, FL 33431 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: BOWMAN, JEFFREY A
Address: 490 NW 20TH STREET #304A
City-St-Zip: BOCA RATON, FL 33431

Title: MGR () Delete
Name: LYSOGORSKI, DIANE K
Address: 490 NW 20TH STREET #304A
City-St-Zip: BOCA RATON, FL 33431

Title: MGRM () Delete
Name: OLIVER, LAURENT
Address: 2616 QUAY DOCK ROAD
City-St-Zip: VERO BEACH, FL 32967

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: JEFFREY AUSTIN BOWMAN

PRES

02/26/2009

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