

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000026160

FILED
Apr 17, 2009
Secretary of State

Entity Name: SEA BREEZE OCEAN DEVELOPERS S, LLC

Current Principal Place of Business:

19950 WEST COUNTRY CLUB DRIVE
TENTH FLOOR
AVENTURA, FL 33180

New Principal Place of Business:

Current Mailing Address:

19950 WEST COUNTRY CLUB DRIVE
TENTH FLOOR
AVENTURA, FL 33180

New Mailing Address:

FEI Number: 20-3143059

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROMINE, MARIO A
19950 WEST COUNTRY CLUB DRIVE
TENTH FLOOR
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

ROMINE, MARIO A
19501 BISCAYNE BOULEVARD
SUITE 400
AVENTURA, FL 33180 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:

04/17/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SOFFER, JEFFREY
Address: 19950 WEST COUNTRY CLUB DRIVE, TENTH FLOOR
City-St-Zip: AVENTURA, FL 33180

Title: MGRM () Delete
Name: SOFFER, JACQUELYN
Address: 19501 BISCAYNE BOULEVARD, SUITE 400
City-St-Zip: AVENTURA, FL 33180

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: JEFFREY SOFFER

MGRM

04/17/2009

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