## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000028635

Entity Name: NOCTURNAL MIAMI, LLC

FILED May 10, 2009 Secretary of State

**New Principal Place of Business: Current Principal Place of Business:** 

50 NE 11 STREET MIAMI, FL 33132

**Current Mailing Address: New Mailing Address:** 

50 NE 11 STREET 1602 ALTON RD.

MIAMI, FL 33132 #630 MIAMI BEACH, FL 33139 US

ADDITIONS/CHANGES:

FEI Number: 11-3745335 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:

QUITOVIERA, GARY E KOFMAN, GLENN 50 NE 11TH ST. 1602 ALTON RD.

MIAMI, FL 33132 #630 MIAMI BEACH, FL 33139 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: GLENN KOFMAN 05/10/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

MGR Title: (X) Change ( ) Addition () Delete

QUITOVIERA, GARY C KOFMAN, GLENN Name: Name: Address: 50 NE 11 STREET Address: 50 NE 11 STREET City-St-Zip: MIAMI, FL 33132 City-St-Zip: MIAMI, FL 33132

Title: MGR (X) Delete Title: () Change () Addition

Name: KOFMAN, GLENN Name: Address: 50 NE 11TH ST. Address: City-St-Zip: MIAMI, FL 33132 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: GLENN KOFMAN 05/10/2009