

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000036038

FILED
Jan 20, 2009
Secretary of State

Entity Name: SAN REMO PROFESSIONALS, LLC

Current Principal Place of Business:

6405 RED ROAD
608
CORAL GABLES, FL 33143

Current Mailing Address:

6405 RED ROAD
608
CORAL GABLES, FL 33143

New Principal Place of Business:

6705 RED ROAD
608
CORAL GABLES, FL 33143

New Mailing Address:

6705 RED ROAD
608
CORAL GABLES, FL 33143

FEI Number: 20-2084969

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILSON, DONALD D JR.
C/O DONALD D. WILSON JR., P.A.
6705 RED ROAD, SUITE 608
CORAL GABLES, FL 33143 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: MGRM () Delete
Name: WILSON, JR., DONALD D
Address: 6705 RED ROAD, SUITE 608
City-St-Zip: CORAL GABLES, FL 33143

Title: MGR () Delete
Name: LIEBLING, STEWART G
Address: 6705 RED ROAD, SUITE 608
City-St-Zip: CORAL GABLES, FL 33143

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: DONALD D. WILSON JR.

D

01/20/2009

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