

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000038213

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Entity Name:** FOR FIVE, L.L.C.

**Current Principal Place of Business:**

2625 COLLINS AVE. APT. #906-907  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

**Current Mailing Address:**

100 NORTH BISCAYNE BLVD  
SUITE 500  
MIAMI, FL 33132

**New Mailing Address:**

**FEI Number:** 26-0099209      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JADE ASSOCIATES MIAMI INC  
100 NORTH BISCAYNE BLVD  
SUITE 500  
MIAMI, FL 33132 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  
**Name:** ALLOUCHE, ALBERT  
**Address:** 100 N BISCAYNE BLVD. STE 500  
**City-St-Zip:** MIAMI, FL 33132

**Title:** MGRM  
**Name:** ALLOUCHE, MICHELE  
**Address:** 100 N BISCAYNE BLVD. STE 500  
**City-St-Zip:** MIAMI, FL 33132

I hereby 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: ALLOUCHE ALBERT

MGRM

04/27/2012

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