

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000046343

Entity Name: 520 NE 7TH AVENUE, LLC

FILED  
Jan 19, 2009  
Secretary of State

## Current Principal Place of Business:

235 NE 4TH AVENUE  
STE. 101  
DELRAY BEACH, FL 33483 US

## New Principal Place of Business:

## Current Mailing Address:

235 NE 4TH AVENUE  
STE. 101  
DELRAY BEACH, FL 33483 US

## New Mailing Address:

65 NE 4TH AVENUE  
STE. H  
DELRAY BEACH, FL 33483 US

FEI Number: 20-2540648

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PERRI, PETER  
235 NE 4TH AVENUE  
STE. 101  
DELRAY BEACH, FL 33483 US

## Name and Address of New Registered Agent:

PERRI, PETER  
65 NE 4TH AVENUE  
STE. H  
DELRAY BEACH, FL 33483 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: PETER PERRI

01/19/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: FORD, MARK M  
Address: 235 NE 4TH AVENUE, STE. 101  
City-St-Zip: DELRAY BEACH, FL 33483 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR ( ) Change (X) Addition  
Name: PETER, PERRI  
Address: 65 NE 4TH AVENUE STE. H  
City-St-Zip: DELRAY BEACH, FL 33483 US

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: PETER PERRI

MGR

01/19/2009

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