

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000048668

Entity Name: GENORA, LLC

FILED
Jan 03, 2005
Secretary of State

Current Principal Place of Business:

1671 NW 101 HWY
PLANTATION, FL 33372

New Principal Place of Business:

1671 NW 101 WAY
PLANTATION, FL 333226502 US

Current Mailing Address:

1671 NW 101 HWY
PLANTATION, FL 33372

New Mailing Address:

1671 NW 101 WAY
PLANTATION, FL 333226502 US

FEI Number: 20-1367596

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YANOWITCH, PETER J
232 ANDALUSIA AVE
CORAL GABLES, FL 33131 US

Name and Address of New Registered Agent:

SIROTA, NIKI
1671 NW 101 WAY
PLANTATION, FL 333226502 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: NIKI SIROTA

01/03/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: SIROTA, NIKI
Address: 1671 NW 101 HWY
City-St-Zip: PLANTATION, FL 33372

Title: MGRM () Delete
Name: SIROTA, NORMAN
Address: 1671 NW 101 HWY
City-St-Zip: PLANTATION, FL 33372

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SIROTA, NIKI
Address: 1671 NW 101 WAY
City-St-Zip: PLANTATION, FL 333226502 US

Title: MGRM (X) Change () Addition
Name: SIROTA, NORMAN
Address: 1671 NW 101 WAY
City-St-Zip: PLANTATION, FL 333226502 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: NIKI SIROTA

MGR

01/03/2005

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