

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000060318

FILED
Mar 24, 2009
Secretary of State

Entity Name: BISCAYNE SHORES DEVELOPMENT GROUP LLC

Current Principal Place of Business:

11111 BISCAYNE BLVD., TOWER 3, SUITE 1758
MIAMI, FL 33181

New Principal Place of Business:

11111 BISCAYNE BLVD.
TOWER 3, SUITE 1758
MIAMI, FL 33181

Current Mailing Address:

11111 BISCAYNE BLVD., TOWER 3, SUITE 1758
MIAMI, FL 33181

New Mailing Address:

11111 BISCAYNE BLVD.
TOWER 3, SUITE 1758
MIAMI, FL 33181

FEI Number: 43-2058891

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEEGAN, TIMOTHY J
11111 BISCAYNE BLVD
TOWER 3, SUITE 1758
MIAMI, FL 33181 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: KEEGAN, TIMOTHY J
Address: 11111 BISCAYNE BOULEVARD, BLDG. 3 #1758
City-St-Zip: MIAMI, FL 33181

Title: MGRM () Delete
Name: JOSEF, EDEED B
Address: 59 BRISTOL DR.
City-St-Zip: MANHASSET, NY 11030

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: TIMOTHY J. KEEGAN

MGRM

03/24/2009

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