

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000091353

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: ATLANTIC HOTELS CONSULTING, LLC

**Current Principal Place of Business:**

3505 S. OCEAN DRIVE  
SUITE # 1001  
HOLLYWOOD, FL 33019 US

**New Principal Place of Business:**

**Current Mailing Address:**

3505 S. OCEAN DRIVE  
SUITE # 1001  
HOLLYWOOD, FL 33019 US

**New Mailing Address:**

FEI Number: 20-5136617      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

PORRO, CARLOS R  
151 CRANDON BLVD  
SUITE # 533  
KEY BISCAYNE, FL 33149 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: MGR ( ) Delete  
Name: RIVAS, MOISES  
Address: 3505 S. OCEAN DR. SUITE #100  
City-St-Zip: HOLLYWOOD, FL 33019

Title: MGR ( ) Delete  
Name: OPPENHEIM, ROLF  
Address: 4076 STAGHORN LANE  
City-St-Zip: WESTON, FL 33331

Title: MGR ( ) Delete  
Name: CONTRERAS, OSCAR E  
Address: 700 WEST EXPRESSWAY 83  
City-St-Zip: MC ALLEN, TX 18507

Title: MGR ( ) Delete  
Name: PORRO, CARLOS R  
Address: 151 CRANDON BLVD. #533  
City-St-Zip: KEY BISCAYNE, FL 33149

**ADDITIONS/CHANGES:**

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

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

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: MOISES RIVAS

MGR

04/30/2009

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