

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000027010

Entity Name: GROUP INVESMART, L.L.C.

FILED
Jan 05, 2010
Secretary of State

Current Principal Place of Business:

1880 NW 97TH AVENUE
MIAMI, FL 33172

New Principal Place of Business:

Current Mailing Address:

1880 NW 97TH AVENUE
MIAMI, FL 33172

New Mailing Address:

FEI Number: 20-3728070

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHOCRON, SADIA
19421 N. E. 14 COURT
NORTH MIAMI BEACH, FL 33179 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: CHOCRON, SADIA
Address: 19421 N. E. 14 COURT
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: MGRM
Name: CHOCRON, SIMY
Address: 19421 N. E. 14 COURT
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: MGRM
Name: EDDERA, PERLA
Address: 19421 N. E. 14 COURT
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: MGRM
Name: CHOCRON, JOSE M.
Address: 19421 N. E. 14 COURT
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: MGRM
Name: CHOCRON, MOISES
Address: 19421 N. E. 14 COURT
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: MGR
Name: HADIDA, SALOMON
Address: 19421 N. E. 14 COURT
City-St-Zip: NORTH MIAMI BEACH, FL 33179

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: SALOMON HADIDA

P

01/05/2010

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