

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000029142

FILED
Jan 16, 2009
Secretary of State

Entity Name: COST ENTERPRISES, LLC

Current Principal Place of Business:

951 NE 167TH ST
SUITE 102
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

Current Mailing Address:

951 NE 167TH ST
SUITE 102
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

FEI Number: 20-2558047

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAMIR, OFER
951 NE 167TH TERR
SUITE 102
NORTH MIAMI BEACH, FL 33162 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: TAMIR, OFER
Address: 951 NE 167TH ST SUITE 102
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: MGRM () Delete
Name: GIL, COHEW
Address: 3850 HOLLYWOOD BLVD SUITE 406
City-St-Zip: HOLLYWOOD, FL 33021

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: OFER TAMIR

OWNE

01/16/2009

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