

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000068550

Entity Name: KOEN INVESTORS, LLC

FILED
Apr 19, 2009
Secretary of State

Current Principal Place of Business:

18800 NE 29TH AVE.
APT 315
AVENTURA, FL 33180 US

New Principal Place of Business:

Current Mailing Address:

18800 NE 29TH AVE.
APT 315
AVENTURA, FL 33180 US

New Mailing Address:

FEI Number: 20-3154133

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOEN, RONNY
18800 NE 29TH AVE
APT 315
AVENTURA, FL 33180 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: KOEN, NELSON
Address: 807 CLARA DRIVE
City-St-Zip: PALO ALTO, CA 94303 US

Title: MGRM () Delete
Name: KOEN, RONNY
Address: 18800 NE 29TH AVE APT 315
City-St-Zip: AVENTURA, FL 33180 US

Title: MGRM () Delete
Name: COHEN, GLORIA
Address: 18800 NE 29TH AVE APT 315
City-St-Zip: AVENTURA, FL 33180 US

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:

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: NELSON KOEN

MGRM

04/19/2009

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