

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000071734

FILED  
May 01, 2009  
Secretary of State

Entity Name: CURE & PENABAD STUDIO, LLC

**Current Principal Place of Business:**

1209 SAN MIGUEL AVENUE  
CORAL GABLES,, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

1209 SAN MIGUEL AVENUE  
CORAL GABLES,, FL 33134

**New Mailing Address:**

235 ALTARA AVENUE  
CORAL GABLES,, FL 33146

FEI Number: 20-4522453      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

PENABAD, CORALEE G  
200 SOUTH BISCAYNE BLVD  
SUITE 3000  
MIAMI, FL 33131 US

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

PENABAD, CORALEE G  
235 ALTARA AVENUE  
CORAL GABLES, FL 33146 US

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: CORALEE PENABAD

05/01/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: PENABAD-CURE, CARIE A  
Address: 1209 SAN MIGUEL AVENUE  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM ( ) Delete  
Name: CURE, ADIB  
Address: 1209 SAN MIGUEL AVENUE  
City-St-Zip: CORAL GABLES,, FL 33134

**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: CARIE PENABAD-CURE

MGRM

05/01/2009

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