

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000079546

FILED  
May 01, 2008  
Secretary of State

**Entity Name:** EXCLUSIVE ROYAL REALTY OF SOUTH FLORIDA, LLC

**Current Principal Place of Business:**

9559 COLLINS AVE  
310  
SURFSIDE, FL 33154

**New Principal Place of Business:**

**Current Mailing Address:**

9559 COLLINS AVE  
310  
SURFSIDE, FL 33154

**New Mailing Address:**

**FEI Number:** 20-3290610      **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:**

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

ZAVULUNOV, EDUARD  
9559 COLLINS AVE  
310  
SURFSIDE, FL 33154 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: ZAVULUNOV, EDUARD  
Address: 9559 COLLINS AVE SUITE 310  
City-St-Zip: SURFSIDE, FL 33154 US

Title: MGRM ( ) Delete  
Name: CAPOVILLA, CATHERINE  
Address: 9559 COLLINS AVE SUITE 310  
City-St-Zip: SURFSIDE, FL 33154

**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: EDUARD ZAVULUNOV

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05/01/2008

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