

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000079552

Entity Name: BLOCK 53 LLC

FILED
Jan 22, 2009
Secretary of State

Current Principal Place of Business:

LEWIS R. COHEN, P.A.
1111 BRICKELL AVE., SUITE 2920
MIAMI, FL 33131

New Principal Place of Business:

100 SE 2ND ST.
1250
MIAMI, FL 33131

Current Mailing Address:

LEWIS R. COHEN, P.A.
1111 BRICKELL AVE., SUITE 2920
MIAMI, FL 33131

New Mailing Address:

100 SE 2ND ST.
1250
MIAMI, FL 33131

FEI Number: 20-5422812

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COHEN, LEWIS R
1111 BRICKELL AVE., SUITE 2920
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

MIRMELLI, G
100 SE 2ND ST.
1250
MIAMI, FL 33131 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: GREGORY MIRMELLI

01/22/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: COHEN, JEFFREY
Address: 880 LAKEVIEW DR.
City-St-Zip: MIAMI BEACH, FL 33140

Title: MGRM (X) Delete
Name: COHEN, LEWIS R
Address: 1111 BRICKELL AVE., SUITE 2920
City-St-Zip: MIAMI, FL 33131

Title: MGRM (X) Delete
Name: MIRMELLI, GREGORY
Address: 1215 NORTH VENETIAN WAY
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MIRMELLI, GREGORY
Address: 100 SE 2ND ST. SUITE 1250
City-St-Zip: MIAMI, FL 33131

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: GREGORY MIRMELLI

MGRM

01/22/2009

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