

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000091589

**FILED**  
**Mar 10, 2010**  
**Secretary of State**

**Entity Name:** LATITUDE ONE 1614 LLC

**Current Principal Place of Business:**

C/O MS. BENAİM, 99 S.E. MIZNER BLVD.  
SUITE/APT # 601  
BOCA RATON, FL 33432 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O MS. BENAİM, 99 S.E. MIZNER BLVD.  
SUITE/APT # 601  
BOCA RATON, FL 33432 US

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

IVONNE, ATTAS  
C/O MS. BENAİM, 99 S.E. MIZNER BLVD  
SUITE/APT #601  
BOCA RATON, FL 33432 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  
Name: ATTAS, IVONE  
Address: C/O MS. BENAİM, 99 S.E. MIZNER BLVD, 601  
City-St-Zip: BOCA RATON, FL 33432 US

Title: D  
Name: JONATHAN, HUMPIERRES  
Address: C/O MS BENAİM 99 S.E MIZNER BLVD 606  
City-St-Zip: BOCA RATON, FL 33432

I hereby 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: IVONNE ATTAS

MMM

03/10/2010

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