

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000096225

FILED  
Aug 28, 2009  
Secretary of State

**Entity Name:** S & S INTERNATIONAL DEVELOPERS, L.L.C.

**Current Principal Place of Business:**

501 GOLDEN ISLE DRIVE, SUITE 206 B  
HALLANDALE, FL 33009

**New Principal Place of Business:**

**Current Mailing Address:**

501 GOLDEN ISLE DRIVE, SUITE 206 B  
HALLANDALE, FL 33009

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For (X)** **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:**

SERBER, DANIEL J ESQ  
TURNBERRY PLAZA, SUITE 801  
2875 N.E. 191ST STREET  
AVENTURA, FL 33180 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:**

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: LANIADO, SAUL  
Address: 501 GOLDEN ISLE DRIVE, SUITE 206 B  
City-St-Zip: HALLANDALE, FL 33009

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Delete  
Name: SUTTON, SALOMON  
Address: 501 GOLDEN ISLE DRIVE, SUITE 206 B  
City-St-Zip: HALLANDALE, FL 33009

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: SALOMON SUTTON

MGRM

08/28/2009

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