

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000100351

FILED
Apr 30, 2009
Secretary of State

Entity Name: SCHWARTZ DEVELOPMENT GROUP, LLC

Current Principal Place of Business:

80 NORTH HIBISCUS DRIVE
MIAMI BEACH, FL 33139

New Principal Place of Business:

50 BISCAYNE BLVD #3806
MIAMI, FL 33132

Current Mailing Address:

80 NORTH HIBISCUS DRIVE
MIAMI BEACH, FL 33139

New Mailing Address:

50 BISCAYNE BLVD #3806
MIAMI, FL 33132

FEI Number: 20-3607900

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHWARTZ, MOSES
80 N. HIBISCUS DR.
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

SCHWARTZ, MOSES
50 BISCAYNE BLVD #3806
MIAMI, FL 33132 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:

04/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SCHWARTZ, MOSES
Address: 80 NORTH HIBISCUS DRIVE
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGR () Delete
Name: SCHWARTZ, FRANK
Address: 80 NORTH HIBISCUS DRIVE
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SCHWARTZ, MOSES
Address: 50 BISCAYNE BLVD. #3806
City-St-Zip: MIAMI, FL 33132

Title: MGR (X) Change () Addition
Name: SCHWARTZ, FRANK
Address: 50 BISCAYNE BLVD. #3806
City-St-Zip: MIAMI, FL 33132

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: MOSES SCHWARTZ

MGR

04/30/2009

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