

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000105973

Entity Name: SOBE SPORTS CLUB, LLC

FILED  
Feb 04, 2009  
Secretary of State

**Current Principal Place of Business:**

1676 ALTON ROAD  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 398976  
MIAMI BEACH, FL 33239

**New Mailing Address:**

FEI Number: 20-3720364

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PAUL, COLLINS  
822 LENOX AVE. #2  
MIAMI BEACH, FL 33139 US

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

PAUL, COLLINS  
1323 N.E. 104TH ST.  
MIAMI SHORES, FL 33138 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: PAUL F COLLINS

02/04/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: COLLINS, PAUL  
Address: 822 LENOX AVE. #2  
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM ( ) Delete  
Name: SIMMONS, PATRICK J  
Address: 822 LENOX AVE. #2  
City-St-Zip: MIAMI BEACH, FL 33139

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: COLLINS, PAUL  
Address: 1323 N.E. 104TH ST  
City-St-Zip: MIAMI SHORES, FL 33138

Title: MGRM (X) Change ( ) Addition  
Name: SIMMONS, PATRICK J  
Address: 1323 N.E. 104TH ST.  
City-St-Zip: MIAMI SHORES, FL 33138

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: PATRICK SIMMONS

MGRM

02/04/2009

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