

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000116610

Entity Name: SHOSHANA HOLDINGS, LLC

FILED  
May 01, 2009  
Secretary of State

## Current Principal Place of Business:

1820 N.E. 163 STREET  
SUITE 100  
NORTH MIAMI BEACH, FL 33162

## New Principal Place of Business:

## Current Mailing Address:

1820 N.E. 163 STREET  
SUITE 100  
NORTH MIAMI BEACH, FL 33162

## New Mailing Address:

FEI Number: 20-8578975      FEI Number Applied For ( )      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:

STEIN, ERIC P ESQ.  
1820 N.E. 163 STREET  
SUITE 100  
NORTH MIAMI BEACH, FL 33162 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:

Title: MGRM ( ) Delete  
Name: FRAIMAN, GUIDO  
Address: 1820 N.E. 163 STREET, SUITE 106  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: MGRM ( ) Delete  
Name: STEIN, CYNTHIA  
Address: 1820 N.E. 163 STREET, SUITE 106  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: MGRM ( ) Delete  
Name: NEUMARK, VIVIANA  
Address: 1820 N.E. 163 STREET, SUITE 106  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: MGRM ( ) Delete  
Name: WOLF, NATALIE  
Address: 1820 N.E. 163 STREET, SUITE 106  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

## ADDITIONS/CHANGES:

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

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

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: CYNTHIA STEIN

MGRM

05/01/2009

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