## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000119808

Entity Name: HOROWITZ CONSULTANTS, LLC

**FILED** May 06, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

785 CRANDON BLVD., #1204 785 CRANDON BLVD. KEY BISCAYNE, FL 33149

1204

KEY BISCAYNE, FL 33149

**Current Mailing Address: New Mailing Address:** 

785 CRANDON BLVD., #1204 785 CRANDON BLVD. KEY BISCAYNE, FL 33149 1204

KEY BISCAYNE, FL 33149

FEI Number: 13-4104988 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

HOROWITZ, BERNARD HOROWITZ, BERNARD 785 CRANDON BLVD., #1204 785 CRANDON BLVD. KEY BISCAYNE, FL 33149 1204

KEY BISCAYNE, FL 33149 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: BERNARD HOROWITZ 05/06/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

( ) Delete Title: () Change () Addition

HOROWITZ, BERNARD Name: Name: Address: 785 CRANDON BLVD., #1204 Address: City-St-Zip: KEY BISCAYNE, FL 33149 City-St-Zip:

Title: MGR () Delete Title: () Change () Addition

HOROWITZ, MARILYN S Name: Name: Address: 785 CRANDON BLVD., #1204 Address: City-St-Zip: KEY BISCAYNE, FL 33149 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: BERNARD HOROWITZ 05/06/2009