

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
Jun 30, 2009
Secretary of State**

DOCUMENT# L06000000322

Entity Name: 36TH AVENUE, LLC

Current Principal Place of Business:

7420 MIAMI VIEW DRIVE
NORTH BAY VILLAGE, FL 33141

New Principal Place of Business:

15173 NE 21ST AVENUE
NORTH MIAMI BEACH, FL 33162

Current Mailing Address:

7420 MIAMI VIEW DRIVE
NORTH BAY VILLAGE, FL 33141

New Mailing Address:

15173 NE 21ST AVENUE
NORTH MIAMI BEACH, FL 33162

FEI Number: 65-1269679 **FEI Number Applied For** () **FEI Number Not Applicable** () **Certificate of Status Desired** (X)
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:

MANNO-CABALLERO, EILEEN M
7420 MIAMI VIEW DRIVE
NORTH BAY VILLAGE, FL 33141 US

Name and Address of New Registered Agent:

MANNO-CABALLERO, EILEEN M
15173 NE 21ST AVENUE
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: _____ Date: 06/30/2009
Electronic Signature of Registered Agent

MANAGING MEMBERS/MANAGERS:

Title: DIR () Delete
Name: BERT, MANNO
Address: 7420 MIAMI VIEW DRIVE
City-St-Zip: MIAMI, FL 33141

Title: DIR () Delete
Name: MANNO, PETER K
Address: 7420 MIAMI VIEW DRIVE
City-St-Zip: MIAMI, FL 33141

Title: DIR () Delete
Name: MANNO, JOSEPHINE A
Address: 7420 MIAMI VIEW DRIVE
City-St-Zip: MIAMI, FL 33141

Title: DIR (X) Delete
Name: MANNO-CABALLERO, EILEEN M
Address: 7420 MIAMI VIEW DRIVE
City-St-Zip: MIAMI, FL 33141

ADDITIONS/CHANGES:

Title: DIR (X) Change () Addition
Name: BERT, MANNO
Address: 15173 NE 21ST AVENUE
City-St-Zip: MIAMI, FL 33162

Title: DIR (X) Change () Addition
Name: MANNO, PETER K
Address: 15173 NE 21ST AVENUE
City-St-Zip: MIAMI, FL 33162

Title: DIR (X) Change () Addition
Name: MANNO-CABALLEROMANNO, EILEEN A
Address: 15173 NE 21ST AVENUE
City-St-Zip: MIAMI, FL 33162

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: EILEEN MANNO-CABALLERO DIR 06/30/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date