

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000004738

Entity Name: COSHAP, LLC

**FILED**  
**Apr 27, 2010**  
**Secretary of State**

## **Current Principal Place of Business:**

1625 N. COMMERCE PKWY  
SUITE #225  
WESTON, FL 33326

## **New Principal Place of Business:**

1950 N. COMMERCE PKWY  
SUITE #5  
WESTON, FL 33326

## **Current Mailing Address:**

1625 N. COMMERCE PKWY  
SUITE #225  
WESTON, FL 33326

## **New Mailing Address:**

1950 N. COMMERCE PKWY  
SUITE #5  
WESTON, FL 33326

FEI Number: 20-4098919

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SHAPIRO, JAY S  
1625 N. COMMERCE PKWY  
SUITE #225  
WESTON, FL 33326 US

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

SHAPIRO, JAY S  
1950 N. COMMERCE PKWY  
SUITE #5  
WESTON, FL 33326 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:

04/27/2010

Electronic Signature of Registered Agent

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: SHAPIRO, JAY S  
Address: 1950 N. COMMERCE PKWY, STE 5  
City-St-Zip: WESTON, FL 33326

Title: MGR  
Name: IRA, COHEN D  
Address: 5521 SW 185TH WAY  
City-St-Zip: SOUTHWEST RANCHES, FL 33332

I hereby 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: JAY S SHAPIRO

MGR

04/27/2010

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