

**2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Apr 09, 2009  
Secretary of State**

DOCUMENT# L06000011020

Entity Name: 63 NW 117 STREET PROPERTY, LLC

**Current Principal Place of Business:**

5055 COLLINS AVENUE  
1F  
MIAMI BEACH, FL 33140

**New Principal Place of Business:**

5055 COLLINS AVENUE  
# 1F  
MIAMI BEACH, FL 33140

**Current Mailing Address:**

5055 COLLINS AVENUE  
1F  
MIAMI BEACH, FL 33140

**New Mailing Address:**

5055 COLLINS AVENUE  
# 1F  
MIAMI BEACH, FL 33140

FEI Number: 20-4216237

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CRAIG M. DORNE, PA  
407 LINCOLN ROAD  
PENTHOUSE SOUTHEAST  
MIAMI BEACH, FL 33139 US

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

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: OPHIR, CARMEL  
Address: 5055 COLLINS AVE. SUITE 1F  
City-St-Zip: MIAMI BEACH, FL 33140

**ADDITIONS/CHANGES:**

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: CARMEL OPHIR

MGRM

04/09/2009

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