

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000014425

Entity Name: NICOLOFF, LLC

FILED  
Mar 26, 2009  
Secretary of State

## Current Principal Place of Business:

C/O BEATRIZ ALVARADO  
701 THREE ISLANDS BLVD #101  
HALLANDALE, FL 33009

## New Principal Place of Business:

600 THREE ISLANDS BLVD  
#202B  
HALLANDALE, FL 33009

## Current Mailing Address:

C/O BEATRIZ ALVARADO  
701 THREE ISLANDS BLVD #101  
HALLANDALE, FL 33009

## New Mailing Address:

600 THREE ISLANDS BLVD  
#202B  
HALLANDALE, FL 33009

FEI Number: 20-4448339

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ALLAN M. GLASER, P.A.  
11900 BISCAYNE BLVD. SUITE 807  
MIAMI, FL 33181 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: P ( ) Delete  
Name: NICOLOFF, CYRIL A  
Address: 600 THREE ISLANDS BLVD #202B  
City-St-Zip: HALLANDALE, FL 33009

Title: S (X) Delete  
Name: ALVARADO, BEATRIZ V  
Address: 701 THREE ISLANDS BLVD #101  
City-St-Zip: HALLANDALE, FL 33009

## ADDITIONS/CHANGES:

Title: P (X) Change ( ) Addition  
Name: NICOLOFF, CYRIL  
Address: 600 THREE ISLANDS BLVD #202B  
City-St-Zip: HALLANDALE, FL 33009

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: CYRIL NICOLOFF

P

03/26/2009

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