

# **2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000020437

**FILED**  
**Feb 11, 2009**  
**Secretary of State**

**Entity Name:** PAH-II, LLC

**Current Principal Place of Business:**

435 GARLEND AVE  
CORAL GABLES, FL 33146

**New Principal Place of Business:**

435 GARLEND AVE  
CORAL GABLES, FL 33146 US

**Current Mailing Address:**

435 GARLEND AVE  
CORAL GABLES, FL 33146

**New Mailing Address:**

**FEI Number:** 20-4388168

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COSTA, HELEN C ESQ.  
7330 WEST 20TH AVENUE  
MIAMI LAKES, FL 33016 US

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

FERNANDEZ, MANUEL  
435 GARLEND A AVENUE  
CORAL GABLES, FL 33146 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: MANUEL FERNANDEZ

02/11/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: FERNANDEZ, MANUEL  
Address: 7330 W. 20TH AVENUE  
City-St-Zip: MIAMI LAKES, FL 33016

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: FERNANDEZ, MANUEL  
Address: 435 GARLEND A AVENUE  
City-St-Zip: CORAL GABLES, FL 33146 US

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: MANUEL FERNANDEZ

MGR

02/11/2009

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