

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000023721

FILED  
May 01, 2009  
Secretary of State

Entity Name: SANS LLC

## Current Principal Place of Business:

18851 NE 29TH AVE STE 900  
AVENTURA, FL 33180

## New Principal Place of Business:

3363 NE 163RD ST  
704  
NORTH MIAMI BEACH, FL 33160

## Current Mailing Address:

18851 NE 29TH AVE STE 900  
AVENTURA, FL 33180

## New Mailing Address:

3363 NE 163RD ST  
704  
NORTH MIAMI BEACH, FL 33160

FEI Number: 20-4450499      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
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:

KATSMAN, MARK  
18851 NE 29TH AVE STE 900  
AVENTURA, FL 33180      US

## Name and Address of New Registered Agent:

KATSMAN, MARK  
3363 NE 163RD ST  
704  
NORTH MIAMI BEACH, FL 33160      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: MARK KATSMAN

05/01/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: IVACHTCHENKO, ALENA  
Address: 7755 VIA FRANCESCO #3  
City-St-Zip: SAN DIEGO, CA 92129

Title: MGR ( ) Delete  
Name: SANS INTERNATIONAL INC.  
Address: 2240 ENCINITAS BLVD., STE D PMP 414  
City-St-Zip: ENCINITAS, CA 92024

Title: MGRM ( ) Delete  
Name: IVACHTCHENKO, SVETLANA  
Address: 2874 CALLE RANCO VISTA  
City-St-Zip: ENCINITAS, CA 92024

Title: MGRM ( ) Delete  
Name: IVACHTCHENKO, ALEXANDRE  
Address: 2874 CALLE RANCO VISTA  
City-St-Zip: ENCINITAS, CA 92024

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ALEXANDRE IVACHTCHENKO

MGRM

05/01/2009

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