

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000037908

Entity Name: NEGRONI HOLDINGS, LLC

FILED
Mar 09, 2009
Secretary of State

Current Principal Place of Business:

10105 CLEARY BOULEVARD
PLANTATION, FL 33324

New Principal Place of Business:

3800 S OCEAN DR
#1803
HOLLYWOOD, FL 33019

Current Mailing Address:

7501 NW 4TH STREET
SUITE 208
PLANTATION, FL 33317

New Mailing Address:

FEI Number: 20-4890841 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE LAW OFFICE OF NYDIA MENENDEZ, LLC
2699 STIRLING ROAD
BUILDING B, SUITE 200
FORT LAUDERDALE, FL 33312 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: MOSES NEGRONI, THANIA
Address: 10105 CLEARY BOULEVARD
City-St-Zip: PLANTATION, FL 33324 US

Title: MGRM () Delete
Name: NEGRONI, JOSE
Address: 10105 CLEARY BOULEVARD
City-St-Zip: PLANTATION, FL 33324 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MOSES NEGRONI, THANIA
Address: 7501 NW 4TH ST #208
City-St-Zip: PLANTATION, FL 33317 US

Title: MGRM (X) Change () Addition
Name: NEGRONI, JOSE
Address: 7501 NW 4TH ST #208
City-St-Zip: PLANTATION, FL 33317 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: JOSE A NEGRONI

MGRM

03/09/2009

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