

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000042238

FILED
Mar 20, 2009
Secretary of State

Entity Name: A.D.MY. RETAIL OF MERRICK LLC

Current Principal Place of Business:

358 SAN LORENZO AVE
SUITE # 1110
CORAL GABLES, FL 33146

New Principal Place of Business:

New Mailing Address:

837 LINCOLN RD.
MIAMI BEACH, FL 33139

Current Mailing Address:

300 ARTHUR GODFREY BLVD.
SUITE 202
MIAMI BEACH, FL 33140

FEI Number: 20-4602834

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MICAAR, AMAR
300 W 41ST ST.
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

AMAR, MICHAEL
19425 39TH AVE.
MIAMI BEACH, FL 33139 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: MICHAEL AMAR

03/20/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KOBAY, YORAM
Address: 641 ST H AVE APT#22N
City-St-Zip: NEW YORK, NY 10019

Title: MGRM () Delete
Name: AMUJAL, DANIEL
Address: 20870 NE 32 ND AVENUE
City-St-Zip: AVENTURA, FL 33180

Title: MRRM () Delete
Name: ALTIT, ALAIN
Address: 299 COCOPLUM ROAD
City-St-Zip: CORAL GABLES, FL 33143

Title: MGRM () Delete
Name: AMAR, MICHAEL
Address: 19425 39 TH AVENUE
City-St-Zip: GODEN BEACH, FL 33160

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: MICHAEL AMAR

MGRM

03/20/2009

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