

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000042399

Entity Name: K. DAVID SCHWARTZ, LLC

FILED  
Jan 09, 2009  
Secretary of State

**Current Principal Place of Business:**

4699 PONCE DE LEON BLVD.  
CORAL GABLES, FL 33146

**New Principal Place of Business:**

**Current Mailing Address:**

4699 PONCE DE LEON BLVD.  
CORAL GABLES, FL 33146

**New Mailing Address:**

FEI Number: 57-1234266

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SCHWARTZ, K. DAVID  
5045 SW 75TH STREET  
MIAMI, FL 33143 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: SCHWARTZ, K. DAVID  
Address: 5045 SW 75TH STREET  
City-St-Zip: MIAMI, FL 33143

Title: MGRM ( ) Delete  
Name: SCHWARTZ, SARAH L  
Address: 5045 SW 75TH STREET  
City-St-Zip: MIAMI, FL 33143

**ADDITIONS/CHANGES:**

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: SCHWARTZ, K. DAVID

MGRM

01/09/2009

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