

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000043996

Entity Name: EASTERN SHORES, LLC

FILED
Apr 29, 2008
Secretary of State

Current Principal Place of Business:

5050 BISCAYNE BLVD
MIAMI, FL 33137 US

New Principal Place of Business:

3777 NE 163 ST
SUITE 102
NORTH MIAMI BEACH, FL 33160 US

Current Mailing Address:

5050 BISCAYNE BLVD
MIAMI, FL 33137 US

New Mailing Address:

3777 NE 163 ST
102
NORTH MIAMI BEACH, FL 33160 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACKENZIE, MONICA
5050 BISCAYNE BLVD
MIAMI, FL 33137 US

Name and Address of New Registered Agent:

MACKENZIE, MONICA
3777 NE 163 ST
SUITE 102
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: _____ 04/29/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MACKENZIE, MONICA
Address: 5050 BISCAYNE BLVD
City-St-Zip: MIAMI, FL 33137 US

Title: MGRM () Delete
Name: DYNASTY, LLC,
Address: 5050 BISCAYNE BLVD
City-St-Zip: MIAMI, FL 33137 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MACKENZIE, MONICA
Address: 3777 NE 163 ST
City-St-Zip: NORTH MIAMI BEACH, FL 33160 US

Title: MGRM (X) Change () Addition
Name: DYNASTY, LLC,
Address: 3777 NE 163 ST
City-St-Zip: NORTH MIAMI BEACH, FL 33160 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: MONICA MACKENZIE MNGR 04/29/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date