

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000047991

Entity Name: 530 S. STATE ROAD 7, LLC

FILED  
Apr 29, 2009  
Secretary of State

## Current Principal Place of Business:

530 S. STATE ROAD 7  
PLANTATION, FL 33317 US

## New Principal Place of Business:

530 S. STATE RD 7  
PLANTATION, FL 33317 US

## Current Mailing Address:

5130 N. FEDERAL HWY  
8  
FORT LAUDERDALE, FL 33308 US

## New Mailing Address:

2800 E. COMMERCIAL BLVD,  
209  
FORT LAUDERDALE, FL 33308 US

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

## Name and Address of Current Registered Agent:

KOENIGSBERG, JAY  
1200 BRICKELL AVENUE  
1900  
MIAMI, FL 33131 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: MATRICARIA, RICHARD JR  
Address: 5900 N ANDREWS AVENUE, SUITE 100  
City-St-Zip: FORT LAUDERDALE, FL 33309 US

Title: MGRM ( ) Delete  
Name: MATRICARIA, RICHARD SR  
Address: 5900 N ANDREWS AVENUE, SUITE 100  
City-St-Zip: FORT LAUDERDALE, FL 33309 US

Title: MGRM ( ) Delete  
Name: MANDEL, DOUGLAS K  
Address: 5900 N ANDREWS AVENUE, SUITE 100  
City-St-Zip: FORT LAUDERDALE, FL 33309 US

Title: MGRM ( ) Delete  
Name: TIKTIN, ADAM J  
Address: 16850 COLLINS AVENUE, SUITES 112-202  
City-St-Zip: SUNNY ISLES, FL 33160 US

## 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: RICHARD MATRICARIA

MGRM

04/29/2009

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