

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000079036

Entity Name: GOSHEN I, LLC

FILED  
Apr 14, 2009  
Secretary of State

**Current Principal Place of Business:**

3525 NORTHWEST 82ND AVENUE  
DORAL, FL 33122

**New Principal Place of Business:**

**Current Mailing Address:**

3525 NORTHWEST 82ND AVENUE  
DORAL, FL 33122

**New Mailing Address:**

FEI Number: 20-5365286

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

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

HO, CAROLINE MGR  
3525 NORTHWEST 82ND AVE  
DORAL, FL 33122 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: CAROLINE HO

04/14/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: HO, CAROLINE  
Address: 3525 NORTHWEST 82ND AVENUE  
City-St-Zip: DORAL, FL 33122

Title: ST ( ) Delete  
Name: CHERN, SHIUNDAN  
Address: 3525 NORTHWEST 82ND AVENUE  
City-St-Zip: DORAL, FL 33122

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ST (X) Change ( ) Addition  
Name: CHERN, SHIUNDAN  
Address: 9299 JAYBIRD CIRCLE  
City-St-Zip: JACKSONVILLE, FL 32257

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: CAROLINE HO

MGR

04/14/2009

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