

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000101308

Entity Name: PF 2903, L.L.C.

FILED  
Feb 10, 2009  
Secretary of State

**Current Principal Place of Business:**

1360 STILLWATER DRIVE  
MIAMI BEACH, FL 33141 US

**New Principal Place of Business:**

**Current Mailing Address:**

2275 BISCAYNE BLVD  
MIAMI, FL 33137 US

**New Mailing Address:**

1360 STILLWATER DRIVE  
MIAMI BEACH, FL 33141 US

FEI Number: 20-5732704

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KIPPERSHMIT, LORENA  
1360 STILLWATER DRIVE  
MIAMI BEACH, FL 33141 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: COSENTINO, FERNANDO  
Address: 2275 BISCAYNE BLVD SUITE 1  
City-St-Zip: MIAMI, FL 33137 US

Title: MGRM ( ) Delete  
Name: COSENTINO, PABLO  
Address: 2275 BISCAYNE BLVD SUITE 1  
City-St-Zip: MIAMI, FL 33137 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: COSENTINO, FERNANDO  
Address: 1360 STILLWATER DR  
City-St-Zip: MIAMI BEACH, FL 33141 US

Title: MGRM (X) Change ( ) Addition  
Name: COSENTINO, PABLO  
Address: 1360 STILLWATER DR  
City-St-Zip: MIAMI BEACH, FL 33141 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: PABLO COSENTINO

MNGR

02/10/2009

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