

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000120817

**FILED**  
**May 01, 2010**  
**Secretary of State**

**Entity Name:** MOSAICCHI WHOLESALE FLORIDA, LLC

**Current Principal Place of Business:**

2701 W. OAKLAND PARK BLVD.  
SUITE 405  
OAKLAND PARK, FL 33311

**New Principal Place of Business:**

**Current Mailing Address:**

2701 W. OAKLAND PARK BLVD.  
SUITE 405  
OAKLAND PARK, FL 33311

**New Mailing Address:**

**FEI Number:** 20-8220014      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

SAKAOGLU, ERHAN ESQ.  
2701 W. OAKLAND PARK BLVD.  
SUITE 405  
OAKLAND PARK, FL 33311 US

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

TARHAN, RIFAT B  
2701 W. OAKLAND PARK BLVD.  
SUITE 405  
OAKLAND PARK, FL 33311 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: RIFAT BORA TARHAN

05/01/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** TARHAN, RIFAT BORA  
**Address:** 2701 W. OAKLAND PARK BLVD. #405  
**City-St-Zip:** OAKLAND PARK, FL 33311

I hereby 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: RIFAT BORA TARHAN

MGRM

05/01/2010

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