

**2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L07000006627

**FILED**  
**Oct 14, 2009**  
**Secretary of State****Entity Name:** MUTUAL OF HALLANDALE I, LLC**Current Principal Place of Business:**555 WASHINGTON AVENUE  
MIAMI BEACH, FL 33139**New Principal Place of Business:****Current Mailing Address:**555 WASHINGTON AVENUE  
MIAMI BEACH, FL 33139**New Mailing Address:****FEI Number:** 20-8260474**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**GENET, CHAVA E  
2200 MUSEUM TOWER  
150 WEST FLAGLER STREET  
MIAMI, FL 33130 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:** MGR ( ) Delete  
**Name:** SOPHER, JACOB I  
**Address:** 425 EAST 61ST STREET  
**City-St-Zip:** NEW YORK, NY 10065**Title:** VP ( ) Delete  
**Name:** MARRELL, GARY R  
**Address:** 425 EAST 61ST STREET  
**City-St-Zip:** NEW YORK, NY 11804**ADDITIONS/CHANGES:****Title:** MGRM (X) Change ( ) Addition  
**Name:** H H & B FLORIDA, LLC  
**Address:** 555 WASHINGTON AVE  
**City-St-Zip:** MIAMI BEACH, FL 33139**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:** JACOB SOPHER

MGR

10/14/2009

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