

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000006822

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: DAVIDOFF LAW FIRM, PLLC

## Current Principal Place of Business:

1680 MICHIGAN AVENUE  
PENTHOUSE #4  
MIAMI BEACH, FL 33139

## New Principal Place of Business:

235 LINCOLN ROAD  
SUITE 310  
MIAMI BEACH, FL 33139

## Current Mailing Address:

1680 MICHIGAN AVENUE  
PENTHOUSE #4  
MIAMI BEACH, FL 33139

## New Mailing Address:

235 LINCOLN ROAD  
SUITE 310  
MIAMI BEACH, FL 33139

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

## Name and Address of Current Registered Agent:

DAVIDOFF, JONATHAN M ESQ.  
1680 MICHIGAN AVENUE  
PENTHOUSE #4  
MIAMI BEACH, FL 33139 US

## Name and Address of New Registered Agent:

DAVIDOFF, JONATHAN M ESQ.  
235 LINCOLN ROAD  
SUITE 310  
MIAMI BEACH, FL 33139 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:

04/30/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: DAVIDOFF, JONATHAN M ESQ.  
Address: 1680 MICHIGAN AVENUE, PENTHOUSE #4  
City-St-Zip: MIAMI BEACH, FL 33139

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: DAVIDOFF, JONATHAN M ESQ.  
Address: 235 LINCOLN ROAD, SUITE 310  
City-St-Zip: MIAMI BEACH, FL 33139

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: JONATHAN M. DAVIDOFF

MGR

04/30/2008

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