2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000009058

Entity Name: ESDS, LLC

FILED Jun 17, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

18851 NE 29TH AVENUE 3030 NE 188TH ST

705 101

AVENTURA., FL 33180 AVENTURA, FL 33180

Current Mailing Address: New Mailing Address:

3030 NE 188TH ST 18851 NE 29TH AVENUE

705

AVENTURA,, FL 33180 AVENTURA,, FL 33180

FEI Number: 20-8303657 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: Name and Address of New Registered Agent:

ROUSSO, MARK E ESQ **18851 NE 29TH AVENUE**

900

AVENTURA, FL 33180 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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

MGRM () Delete

SCHLEIN, DOV C Name: 18851 NE 29TH AVENUE 101 Address: City-St-Zip: AVENTURA, FL 33180

Title: MGRM () Delete SCHLEIN JTWROS, DEBORAH Name: Address: 18851 NE 29TH AVENUE City-St-Zip: AVENTURA, FL 33180

Title: MGRM () Delete

SAAL, ELIAS Name:

Address: 18851 NE 29TH AVENUE City-St-Zip: AVENTURA,, FL 33180

Title: MGRM () Delete Name: SAAL JTEROS, STACEY Address: 18851 NE 29TH AVENUE City-St-Zip: AVENTURA,, FL 33180

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition

Name: SCHLEIN, DOV C Address: 3030 NE 188TH ST # 705 City-St-Zip: AVENTURA, FL 33180

Title: MGRM (X) Change () Addition Name: SCHLEIN JTWROS, DEBORAH Address: 3030 NE 188TH ST # 705 City-St-Zip: AVENTURA, FL 33180

Title: MGRM (X) Change () Addition

SAAL, ELIAS Name:

3030 NE 188TH ST # 705 Address: City-St-Zip: AVENTURA,, FL 33180

Title: MGRM (X) Change () Addition

Name: SAAL JTEROS, STACEY Address: 3030 NE 188TH ST # 705 AVENTURA,, FL 33180 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: DOV C SCHLEIN **MGRM** 06/17/2009