

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000019804

FILED
Jan 27, 2009
Secretary of State

Entity Name: 395 LEUCADENDRA DRIVE, LLC

Current Principal Place of Business:

395 LEUCADENDRA DRIVE
CORAL GABLES, FL 33156 US

New Principal Place of Business:

Current Mailing Address:

13060 S.W. 70 AVENUE
MIAMI, FL 33156 US

New Mailing Address:

FEI Number: 20-8484163

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FINAZZO, NICOLAS
13060 S.W. 70 AVENUE
MIAMI, FL 33156 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: FINAZZO, NICOLAS
Address: 13060 S.W. 70 AVENUE
City-St-Zip: MIAMI, FL 33156 US

Title: MGRM () Delete
Name: FINAZZO, ROSE ANN
Address: 13060 S.W. 70 AVENUE
City-St-Zip: MIAMI, FL 33156 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: FINAZZO, NICOLAS
Address: 13060 S.W. 70 AVENUE
City-St-Zip: MIAMI, FL 33156 US

Title: MGR (X) Change () Addition
Name: FINAZZO, ROSE ANN
Address: 13060 S.W. 70 AVENUE
City-St-Zip: MIAMI, FL 33156 US

Title: MGRM () Change (X) Addition
Name: ENAREY, LP,
Address: 13060 S.W. 70 AVENUE
City-St-Zip: MIAMI, FL 33156 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: NICOLAS FINAZZO

MGR

01/27/2009

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