

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000049858

FILED
Apr 16, 2009
Secretary of State

Entity Name: 18368 LIMITED LIABILITY COMPANY

Current Principal Place of Business:

801 N. CONGRESS AVENUE, STE. 403
BOYNTON BEACH, FL 33426

New Principal Place of Business:

218 EAST DANIA BEACH BLVD
DANIA BEACH, FL 33004

Current Mailing Address:

600 PARKVIEW DRIVE, STE. 306
HALLANDALE, FL 33009

New Mailing Address:

218 EAST DANIA BEACH BLVD
DANIA BEACH, FL 33004

FEI Number: 26-0188805

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JAKOBI, ELLA
600 PARKVIEW DRIVE, STE. 306
HALLANDALE, FL 33009 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: GONEN, ARIK
Address: 2357 STIRLING ROAD
City-St-Zip: DANIA, FL 33312

Title: MGRM () Delete
Name: GAL, DAVID
Address: 2357 STIRLING ROAD
City-St-Zip: DANIA, FL 33312

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GONEN, ARIK
Address: 218 EAST DANIA BEACH BLVD
City-St-Zip: DANIA, FL 33004

Title: MGRM (X) Change () Addition
Name: GAL, DAVID
Address: 218 EAST DANIA BEACH BLVD
City-St-Zip: DANIA, FL 33004

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: ARIK GONEN

MGR

04/16/2009

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