2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000125396

City-St-Zip:

BOCA RATON, FL 33428 US

Entity Name: LXA ENTERPRISES, LLC

FILED Feb 12, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 12556 WEST ATLANTIC BLVD CORAL SPRINGS, FL 33071 US **Current Mailing Address: New Mailing Address:** 12556 WEST ATLANTIC BLVD CORAL SPRINGS, FL 33071 US FEI Number: 26-1595188 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COHEN, JENNIFER 4240 GALT OCEAN DR APT# 2203 FT LAUDERDALE, FL 33308 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete COHEN, ALAN Name: Name: Address: 4240 GALT OCEAN DR, APT# 2203 Address: City-St-Zip: FT LAUDERDALE, FL 33308 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: KASSAM, HAKIM Name: Address: 2129 SEA PINES WAY Address: City-St-Zip: CORAL SPRINGS, FL 33071 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition PANSTER, MICHAEL Name: Name: 21728 FALL RIVER DR Address: Address:

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.

City-St-Zip:

SIGNATURE: ALAN COHEN MGRM 02/12/2009