

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000018889

Entity Name: MIAMI TWICE, LLC

FILED
Feb 23, 2011
Secretary of State

Current Principal Place of Business:

1810 N.W. 78TH AVENUE
PEMBROKE PINES, FL 33024 US

New Principal Place of Business:

Current Mailing Address:

1810 N.W. 78TH AVENUE
PEMBROKE PINES, FL 33024 US

New Mailing Address:

7451 W. OAKLAND PARK BLVD
LAUDERHILL, FL 33319 US

FEI Number: 80-0152912

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FEDDER, THOMAS
1810 N.W. 78TH AVENUE
PEMBROKE PINES, FL 33024 US

Name and Address of New Registered Agent:

BERGMAN, A C
7451 W. OAKLAND PARK BLVD
B
LAUDERHILL, FL 33319 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: A.C. BERGMAN

02/23/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: GREVE, CLAUS
Address: NIELS LYKKES GADE 36
City-St-Zip: NOERRESUNDBY, DK 9400 DK

Title: MGRM
Name: OLSEN, MARTIN
Address: SOLVAENGET 17
City-St-Zip: ALGESTRUP, DK 4682 DK

Title: MGRM
Name: FEDDER, THOMAS
Address: FILIPPAVEJ 51
City-St-Zip: AALBORG, DK 9000 DK

Title: MGRM
Name: BORNE, MADS
Address: HIMMELBJERGVEJ 100
City-St-Zip: SILKEBORG, DK 8600 DK

Title: MGRM
Name: BORDINGGAARD, CHRISTIAN
Address: RODKILDEBANKEN 24
City-St-Zip: LEJRE, DK 4320 DK

Title: MGRM
Name: OKKELS, OLE
Address: OESTERVAENGET 13
City-St-Zip: AALBORG SV, DK 9200 DK

I hereby 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: MADS BORNE

MGRM

02/23/2011

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