

**2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L08000023959

**FILED**  
**Nov 10, 2009**  
**Secretary of State****Entity Name:** NIKKI II LLC**Current Principal Place of Business:**2199 PONCE DE LEON BLVD  
SUITE 301  
CORAL GABLES, FL 33134 US**New Principal Place of Business:**1282 N. E. 191 STREET  
NORTH MIAMI BEACH, FL 33179 US**Current Mailing Address:**2199 PONCE DE LEON BLVD  
SUITE 301  
CORAL GABLES, FL 33134 US**New Mailing Address:**1282 N. E. 191 STREET  
NORTH MIAMI BEACH, FL 33179 US**FEI Number:** 41-2271286**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**STEWART AGENT SERVICES  
2199 PONCE DE LEON BLVD.,  
SUITE 301  
CORAL GABLES, FL 33134 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: MGR ( ) Delete  
Name: STEWART MANAGERS  
Address: 2199 PONCE DE LEON BLVD, #301  
City-St-Zip: CORAL GABLES, FL 33134 US**ADDITIONS/CHANGES:**Title: MGR (X) Change ( ) Addition  
Name: MALUZENSKA, DONATA  
Address: 1282 N. E. 191 STREET  
City-St-Zip: NORTH MIAMI BEACH, FL 33179 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: DONATA MALUZENSKA

MGR

11/10/2009

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