2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000028798

Current Principal Place of Business:

City-St-Zip:

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

AVENTURA, FL 33180 US

MELLOUL, SHLOMO

DANIA, FL 33004 US

299 COCOPLUM ROAD

() Delete

() Delete

CORAL GABLES, FL 33143 US

1210 STIRLING RD SUITE 7B

MGR

MGR

ALTIT, ALAIN

Entity Name: M.D.S.A OF AVENTURA, LLC

FILED Mar 20, 2009 Secretary of State

New Principal Place of Business:

19501 BISCAYNE BLVD **SUITE 2027** AVENTURA, FL 33180 **New Mailing Address: Current Mailing Address:** 300 ARTHUR GODFREY RD 837 LINCOLN RD. SUITE 202 MIAMI BEACH, FL 33139 US MIAMI BEACH, FL 33140 US FEI Number: 26-2242894 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: MOYAL, PATRICK AMAR, MICHAEL 10796 PINES BLVD 19425 39TH AVE SUITE 204 GOLDEN BEACH, FL 33160 US PEMBROKE PINES, FL 33026 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: MICHAEL AMAR 03/20/2009 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete AMAR, MICHAEL Name: Name: 19425 39TH AVENUE Address: Address: City-St-Zip: GOLDEN BEACH, FL 33160 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: AMUIAL, DANIEL Name: Address: 20870 NE 32ND AVENUE Address:

City-St-Zip:

() Change () Addition

() Change () Addition

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

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: MICHAEL AMAR MGR 03/20/2009