2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000039251

Entity Name: MIMIBIZ, LLC

City-St-Zip:

FILED Apr 02, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 23504 MIRABELLA CIRCLE SOUTH BOCA RATON, FL 33433 **Current Mailing Address: New Mailing Address:** 23504 MIRABELLA CIRCLE SOUTH 7040 W. PALMETTO PARK ROAD #4-264 BOCA RATON, FL 33433 BOCA RATON, FL 33433 FEI Number: 26-2457150 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SWARTZ, MIRIAM 23504 MIRABELLA CIRCLE SOUTH BOCA RATON, FL 33433 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: () Delete (X) Change () Addition SWARTZ, MIRIAM Name: SWARTZ, MIRIAM Name: 23504 MIRABELLA CIRCLE SOUTH Address: 23504 MIRABELLA CIRCLE SOUTH Address: City-St-Zip: BOCA RATON, FL 33433 City-St-Zip: BOCA RATON, FL 33433 US Title: Title: MGR () Change (X) Addition () Delete Name: Name: COHEN, SYDNEY Address: Address: 1937 ARROYO AVE City-St-Zip: City-St-Zip: OCEANSIDE, CA 92056 US Title: () Delete Title: MGR () Change (X) Addition ROBINSON, BRUCE Name: Name: Address: Address: 83 LOOKOUT CIRCLE City-St-Zip: City-St-Zip: LARCHMONT, NY 10538 US Title: () Delete Title: MGR () Change (X) Addition Name: Name: ROBISON, PAUL 7271 LEMON GRASS DRIVE Address: Address: City-St-Zip: City-St-Zip: PARKLAND, FL 33076 US Title: () Delete Title: MGR () Change (X) Addition ROBINSON, MICHAEL Name: Name: 230 WEST END AVENUE APT. 1A Address: Address: City-St-Zip: City-St-Zip: NEW YORK CITY, NY 10023 US Title: () Delete Title: () Change (X) Addition LIMANSKY, BEVERLY Name: Name: Address: Address: 6510 COLOMERA DRIVE

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:

BOCA RATON, FL 33433 US

SIGNATURE: MIRIAM SWARTZ MGRM 04/02/2009