

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000051723

**FILED**  
**Apr 29, 2010**  
**Secretary of State**

**Entity Name:** WOLFGANG ROTH & PARTNERS,FINE ART, L.L.C.

**Current Principal Place of Business:**

5153 FISHER ISLAND DRIVE  
FISHER ISLAND, FL 33109

**New Principal Place of Business:**

5341 FISHER ISLAND DRIVE  
FISHER ISLAND, FL 33109

**Current Mailing Address:**

PO BOX 371185  
MIAMI, FL 33137

**New Mailing Address:**

**FEI Number:** 26-2969454

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KLINE, KEVIN F  
2665 SOUTH BAYSHORE DRIVE  
SUITE 903  
MIAMI, FL 33133 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: MGRM  
Name: ROTH, WOLFGANG  
Address: 5341 FISHER ISLAND DRIVE  
City-St-Zip: FISHER ISLAND, FL 33109

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: WOLFGANG ROTH

MGMB

04/29/2010

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