

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
Mar 10, 2009
Secretary of State**

DOCUMENT# L08000055344

Entity Name: ALTZOR LLC

Current Principal Place of Business:

5201 BLUE LAGOON DRIVE
SUITE 914
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

5201 BLUE LAGOON DRIVE
SUITE 914
MIAMI, FL 33126

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MALO, FELIPE A ESQ.
5201 BLUE LAGOON DRIVE
SUITE 914
MIAMI, FL 33126 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 () Delete
Name: LOTZCAR, ELIAHU
Address: 5201 BLUE LAGOON DRIVE #914
City-St-Zip: MIAMI, FL 33126 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Change (X) Addition
Name: GROTTTE, GERTY
Address: 19101 MYSTIC POINTE DR #1601
City-St-Zip: AVENTURA, FL 33180

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: ELIAHU LOTZCAR

MGRM

03/10/2009

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