2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000065821

Entity Name: SACHS SAX CAPLAN, P.L.

FILED Jun 02, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6111 BROKEN SOUND PARKWAY NW, SUITE 200 6111 BROKEN SOUND PARKWAY NW

BOCA RATON, FL 33487 SUITE 200

BOCA RATON, FL 33487

Current Mailing Address: New Mailing Address:

6111 BROKEN SOUND PARKWAY NW, SUITE 200 6111 BROKEN SOUND PARKWAY NW, SUITE 200

BOCA RATON, FL 33487 SUITE 200

BOCA RATON, FL 33487

FEI Number: 26-2950872 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

SACHS, PETER ESQ. SACHS, PETER ESQ.

6111 BROKEN SOUND PARKWAY NW, SUITE 200 6111 BROKEN SOUND PARKWAY NW, SUITE 200

BOCA RATON, FL 33487 US SUITE 200

BOCA RATON, FL 33487 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: 06/02/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: () Delete Title: MGR () Change (X) Addition

Name: Name: SACHS, PETER S

Address: Address: 6111 BROKEN SOUND PARKWAY NW, SUITE 200

City-St-Zip: City-St-Zip: BOCA RATON, FL 33487

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: PETER S. SACHS MGR 06/02/2009