2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000066273

Entity Name: EL CONDO, L.L.C.

Address:

City-St-Zip:

352 CASTLE DRIVE.

ENGLEWOOD CLIFFS, NJ 07632

FILED Jan 05, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5401 COLLINS AVENUE, #1131 MIAMI BEACH, FL 33140 **Current Mailing Address: New Mailing Address:** 352 CASTLE DRIVE ENGLEWOOD CLIFFS, NJ 07632 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BAGDADI, LINNETTE 5401 COLLINS AVENUE, #1131 MIAMI BEACH, FL 33140 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: () Change () Addition () Delete BAGDADI, SELIM Name: Name: Address: 789 WYCOFF AVENUE Address: City-St-Zip: MAHWAH, NJ 07430 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: BAGDADI, LINNETTE Name: Address: 98 GARDEN STREET, APT 2 Address: City-St-Zip: HOBAKEN, NJ 07030 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition BAGDADI, ADELFA Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: LINNETTE BAGDADI MS 01/05/2009