

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000066311

FILED
Jul 02, 2009
Secretary of State

Entity Name: 19 STREET, LLC

Current Principal Place of Business:

ONE BISCAYNE TOWER
2 SOUTH BISCAYNE BLVD., SUITE 2400
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

ONE BISCAYNE TOWER
2 SOUTH BISCAYNE BLVD., SUITE 2400
MIAMI, FL 33131

New Mailing Address:

9600 NW 25TH STREET
SUITE PH
MIAMI, FL 33172

FEI Number: 26-2986548 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:

LEWIS, HAROLD L
ONE BISCAYNE TOWER
2 SOUTH BISCAYNE BLVD., SUITE 2400
MIAMI, FL 33131 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: DE ROSA, ANTHONY
Address: 9600 N.W. 25TH STREET, PENTHOUSE
City-St-Zip: MIAMI, FL 33172

Title: MGR () Delete
Name: BDPB ICP, LLC
Address: 200 S. BISCAYNE BLVD., 6TH FLOOR
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES:

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

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

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: ANTHONY DEROSA

MGRM

07/02/2009

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