

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000073106

Entity Name: SAMJACK LAKEWOOS, LLC

FILED
Apr 16, 2009
Secretary of State

Current Principal Place of Business:

3001 W HALLANDALE BCH BLVD
STE 300
PEMBROKE PINES, FL 33009

Current Mailing Address:

3001 W HALLANDALE BCH BLVD
STE 300
PEMBROKE PINES, FL 33009

New Principal Place of Business:

3001 W HALLANDALE BCH BLVD
STE 300
PEMBROKE PARK, FL 33009

New Mailing Address:

3001 W HALLANDALE BCH BLVD
STE 300
PEMBROKE PARK, FL 33009

FEI Number: 26-3123135

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARBIN, SHERRIE C ESQ
48 E FLAGLER ST
PH-104
MIAMI, FL 33131 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: MGR () Delete
Name: TAVONE, JOHN H
Address: 3001 W HALLANDALE BCH BLVD - STE 300
City-St-Zip: PEMBROKE PINES, FL 33009

Title: MGR () Delete
Name: JAZAYRI, SAM
Address: 3001 W HALLANDALE BCH BLVD - STE 300
City-St-Zip: PEMBROKE PINES, FL 33009

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: TAVONE, JOHN H
Address: 3001 W HALLANDALE BCH BLVD - STE 300
City-St-Zip: PEMBROKE PARK, FL 33009

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: SAM JAZAYRI

MGR

04/16/2009

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