

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000089336

Entity Name: WAREHOUSE 534 LLC

FILED
Feb 02, 2009
Secretary of State

Current Principal Place of Business:

3571 NORTH DIXIE HIGHWAY
OAKLAND PARK, FL 33334

New Principal Place of Business:

Current Mailing Address:

3571 NORTH DIXIE HIGHWAY
OAKLAND PARK, FL 33334

New Mailing Address:

FEI Number: 26-3374589

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEISS, SUZANNE
3571 NORTH DIXIE HIGHWAY
OAKLAND PARK, FL 33334 US

Name and Address of New Registered Agent:

LYNN, BRIAN
TWO UNIVERSITY DRIVE
SUITE 215
PLANTATION, FL 33324 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: BRIAN LYNN

02/02/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BATES, JAMES T
Address: 524 ISLE OF CAPRI
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: MGRM () Delete
Name: BATES, CATIA T
Address: 524 ISLE OF CAPRI
City-St-Zip: FT. LAUDERDALE, FL 33301

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: JAMES T. BATES

MGRM

02/02/2009

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