2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000092233

Entity Name: 5545 HOLDINGS, LLC

FILED Apr 15, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 20201 EAST COUNTRY CLUB DRIVE APT 2207 20201 EAST COUNTRY CLUB DRIVE

AVENTURA, FL 33180 SUITE 2207

AVENTURA, FL 33180

Current Mailing Address: New Mailing Address:

20201 EAST COUNTRY CLUB DRIVE 20201 EAST COUNTRY CLUB DRIVE APT 2207 AVENTURA, FL 33180

SUITE 2207

AVENTURA, FL 33180

FEI Number: 26-3459663 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

STAHLER, ROSALYN STAHLER, ROSALYN

20201 EAST COUNTRY CLUB DRIVE APT 2207 20201 EAST COUNTRY CLUB DRIVE

AVENTURA, FL 33180 SUITE 2207 AVENTURA, FL 33180 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: 04/15/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

MANES, HYMAN Name: Name:

Address: Address: 20201 EAST COUNTRY CLUB DRIVE, SUITE 2207

City-St-Zip: City-St-Zip: AVENTURA, FL 33180

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

Name: Name: MANES, SONIA

Address: Address: 20201 EAST COUNTRY CLUB DRIVE, SUITE 2207

City-St-Zip: City-St-Zip: AVENTURA, FL 33180

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

STAHLER, ROSALYN Name: Name:

20201 EAST COUNTRY CLUB DRIVE, SUITE 2207 Address: Address:

City-St-Zip: City-St-Zip: AVENTURA, FL 33180

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: HYMAN MANES **MGRM** 04/15/2009