

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000105042

FILED
May 06, 2009
Secretary of State

Entity Name: CHARTER PB BOYNTON, LLC

Current Principal Place of Business:

1915 HARRISON STREET
HOLLYWOOD, FL 33020

New Principal Place of Business:

Current Mailing Address:

1915 HARRISON STREET
HOLLYWOOD, FL 33020

New Mailing Address:

FEI Number: 26-4389975 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:

SERBER, DANIEL J ESQ.
2875 NE 191 ST
SUITE 801
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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LEONOFF, HERNAN
Address: 1915 HARRISON STREET
City-St-Zip: HOLLYWOOD, FL 33020

Title: MGRM () Delete
Name: SAIEGH, MARCELO
Address: 1915 HARRISON STREET
City-St-Zip: HOLLYWOOD, FL 33020

Title: MGRM () Delete
Name: BOGOMOLNI, GUSTAVO
Address: 1915 HARRISON STREET
City-St-Zip: HOLLYWOOD, FL 33020

ADDITIONS/CHANGES:

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

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: MARCELO SAIEGH

MGRM

05/06/2009

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