

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000109960

FILED  
Apr 06, 2009  
Secretary of State

Entity Name: SILVER SHADOW TRAVEL, LLC

## Current Principal Place of Business:

4919 SW 33RD WAY  
HOLLYWOOD, FL 33312

## New Principal Place of Business:

## Current Mailing Address:

4919 SW 33RD WAY  
HOLLYWOOD, FL 33312

## New Mailing Address:

FEI Number: 30-0516343

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHWARTZ, EILEEN  
4919 SW 33RD WAY  
HOLLYWOOD, FL 33312 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: SCHWARTZ, EILEEN  
Address: 4919 SW 33RD WAY  
City-St-Zip: HOLLYWOOD, FL 33312

Title: MGRM ( ) Delete  
Name: SCHWARTZ, MICHAEL  
Address: 4919 SW 33RD WAY  
City-St-Zip: HOLLYWOOD, FL 33312

Title: MGRM ( ) Delete  
Name: STEIN, ALVIN  
Address: 3650 45TH AVE.  
City-St-Zip: HOLLYWOOD, FL 33021

Title: MGRM ( ) Delete  
Name: STEIN, LEONA  
Address: 3650 45TH AVE.  
City-St-Zip: HOLLYWOOD, FL 33021

## 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:

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: EILEEN SCHWARTZ

MGR

04/06/2009

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