

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000109960

**FILED**  
**Apr 09, 2012**  
**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  
**Name:** SCHWARTZ, EILEEN  
**Address:** 4919 SW 33RD WAY  
**City-St-Zip:** HOLLYWOOD, FL 33312

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

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

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

I hereby 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

04/09/2012

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