

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000010493

**FILED**  
**Feb 16, 2010**  
**Secretary of State**

**Entity Name:** FLORIDA MULTIBUSSINESS LLC

**Current Principal Place of Business:**

55 NE 5TH AVENUE STE 501  
BOCA RATON, FL 33432

**New Principal Place of Business:**

7038SW 48 LANE  
MIAMI, FL 33155

**Current Mailing Address:**

55 NE 5TH AVENUE STE 501  
BOCA RATON, FL 33432

**New Mailing Address:**

2121 PONCE DE LEON BLVD.  
SUITE 1050  
CORAL GABLES, FL 33134

**FEI Number:** 56-1948225

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TRONCONE, MONIQUE  
55 NE 5TH AVENUE STE 501  
BOCA RATON, FL 33432 US

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

CONSULTING SERVICES OF SOUTH FLORIDA INC  
2121 PONCE DE LEON BLVD.  
SUITE 1050  
CORAL GABLES, FL 33134 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: EILEEN GARCIA

02/16/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: BURG, JOSE L  
Address: 7036 SW 48 LN  
City-St-Zip: MIAMI, FL 33155

Title: MGRM  
Name: MENDIRI DE BURG, MARIA  
Address: 7036 SW 48 LN  
City-St-Zip: MIAMI, FL 33155

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: JOSEF BURG

MR

02/16/2010

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