

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000017216

**FILED**  
**Apr 29, 2010**  
**Secretary of State**

**Entity Name:** CARLOS, NIELSEN, PETERSON & ZANDER, L.L.C.

**Current Principal Place of Business:**

494 8TH AVE., SUITE 1005  
NEW YORK, NY 10001

**New Principal Place of Business:**

**Current Mailing Address:**

494 8TH AVE., SUITE 1005  
NEW YORK, NY 10001

**New Mailing Address:**

MCM BUS. MGMT 1067-69 MORRIS PARK AVE  
BRONX, NY 10461 US

**FEI Number:** 36-4035453

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

UNITED CORPORATE SERVICES, INC.  
9200 SOUTH DADELAND BLVD., SUITE 508  
MIAMI, FL 33156 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: MGRM  
Name: CARLSON, BRAD  
Address: 494 8TH AVE., SUITE 1005  
City-St-Zip: NEW YORK, NY 10001

Title: MGRM  
Name: NIELSEN, RICHARD  
Address: 494 8TH AVE., SUITE 1005  
City-St-Zip: NEW YORK, NY 10001

Title: MGRM  
Name: ZANDER, ROBIN  
Address: 494 8TH AVE., SUITE 1005  
City-St-Zip: NEW YORK, NY 10001

Title: MGRM  
Name: PETERSON, TOM  
Address: 494 8TH AVE., SUITE 1005  
City-St-Zip: NEW YORK, NY 10001

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:** BRAD CARLSON

MGMR

04/29/2010

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