

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000026376

FILED  
Mar 02, 2010  
Secretary of State

Entity Name: SHOPPES ON RIVERS, LLC

**Current Principal Place of Business:**

4114 WOODLANDS PARKWAY, SUITE 401  
PALM HARBOR, FL 34685

**New Principal Place of Business:**

**Current Mailing Address:**

4114 WOODLANDS PARKWAY, SUITE 401  
PALM HARBOR, FL 34685

**New Mailing Address:**

FEI Number: 26-4506711

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NIKJEH, FARHOD M  
4114 WOODLANDS PARKWAY, SUITE 401  
PALM HARBOR, FL 34685 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: NIKJEH, FARHOD M  
Address: 4114 WOODLANDS PARKWAY, SUITE 401  
City-St-Zip: PALM HARBOR, FL 34685

Title: MGRM  
Name: HAJIAN, REZA  
Address: 2531 W. MARYLAND AVE.  
City-St-Zip: TAMPA, FL 33606

Title: MGRM  
Name: MAVROMATIS, LEON  
Address: 556 ANCLOTE ROAD  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: MGRM  
Name: MAVROMATIS, NICHOLAS  
Address: 556 ANCLOTE ROAD  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: MGRM  
Name: KERDEMELIDIS, KOSTAS  
Address: 556 ANCLOTE ROAD  
City-St-Zip: TARPON SPRINGS, FL 34689

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: FARHOD M. NIKJEH

MGR

03/02/2010

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