

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000070626

Entity Name: ARTECH UNIT 338 LLC

FILED
May 04, 2010
Secretary of State

Current Principal Place of Business:

1680 MICHIGAN AVENUE
1024
MIAMI BEACH, FL 33139

New Principal Place of Business:

2950 NE 188TH STREET
338
AVENTURA, FL 33180

Current Mailing Address:

1680 MICHIGAN AVENUE
1024
MIAMI BEACH, FL 33139

New Mailing Address:

1945 SOUTH OCEAN DRIVE
1008
HALLANDALE BEACH, FL 33009

FEI Number: 27-1514394 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

STRAUCH, SAMUEL
1680 MICHIGAN AVENUE
1024
MIAMI BEACH, FL 33139 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: TINEO, ANIBAL
Address: 1680 MICHIGAN AVENUE 1024
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM
Name: TINEO, ANTONIA
Address: 1680 MICHIGAN AVENUE 1024
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM
Name: TINEO, CLARET
Address: 1680 MICHIGAN AVENUE 1024
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM
Name: TINEO, CIRA
Address: 1680 MICHIGAN AVENUE 1024
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM
Name: TIENO, ANIBAL A
Address: 1680 MICHIGAN AVENUE 1024
City-St-Zip: MIAMI BEACH, FL 33139

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: ANTONIA TINEO

MGRM

05/04/2010

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