

2010 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L10000000087

FILED
Nov 12, 2010
Secretary of State

Entity Name: REAL ESTATE GRAND CENTRAL LLC

Current Principal Place of Business:

8421 PIONEER RD 7
104236
WEST PALM BEACH, FL 33411 US

New Principal Place of Business:

8421 PIONEER RD 7
WEST PALM BEACH, FL 33411 US

Current Mailing Address:

8421 PIONEER RD 7
104236
WEST PALM BEACH, FL 33411 US

New Mailing Address:

8421 PIONEER RD 7
WEST PALM BEACH, FL 33411 US

FEI Number: 27-1594956

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INSTINCTIVE MEASURES INC.
125 SOUTH SR 7
104236
WELLINGTON, FL 33414 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: GREEN, MARIA
Address: 8421 PIONEER RD 7
City-St-Zip: WEST PALM BEACH, FL 33411 US

Title: MGRM
Name: PSB LIMITED GROUP LLC
Address: 6601 PARKER AVE
City-St-Zip: WEST PALM BEACH, FL 33405 US

Title: MGRM
Name: DEBERARDINIS, PHILIP J
Address: 6601 PARKER AVE
City-St-Zip: WEST PALM BEACH, FL 33405

Title: MGRM
Name: DEBERARDINIS, SANDRA
Address: 6601 PARKER AVE
City-St-Zip: WEST PALM BEACH, FL 33405

Title: MGRM
Name: GREEN, JEFFERY
Address: 8421 PIONEER RD
City-St-Zip: WEST PALM BEACH, FL 33411

Title: MGRM
Name: INSTINCTIVE MEASURES INC.
Address: 125 SOUTH SR 7, SUITE 104236
City-St-Zip: WELLINGTON, FL 33414

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: MARIA GREEN

MGRM

11/12/2010

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