

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000006406

FILED  
Mar 25, 2011  
Secretary of State

Entity Name: APOLO 507, LLC

**Current Principal Place of Business:**

2875 N.E. 191ST STREET  
TURNBERRY PLAZA, SUITE 801  
AVENTURA, FL 33180

**New Principal Place of Business:**

**Current Mailing Address:**

2875 N.E. 191ST STREET  
TURNBERRY PLAZA, SUITE 801  
AVENTURA, FL 33180

**New Mailing Address:**

FEI Number: 68-0679693

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SERBER, DANIEL J ESQ.  
2875 N.E. 191ST STREET  
TURNBERRY PLAZA, SUITE 801  
AVENTURA, FL 33180 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: MIJAL DORIT BESENDORF RAJNERMAN  
Address: 2875 N.E. 191ST STREET, STE 801  
City-St-Zip: AVENTURA, FL 33180

Title: MGRM  
Name: JORGE DANIEL RAJNERMAN  
Address: 2875 N.E. 191ST STREET, STE 801  
City-St-Zip: AVENTURA, FL 33180

Title: MGRM  
Name: ARIEL RAJNERMAN  
Address: 2875 N.E. 191ST STREET, STE 801  
City-St-Zip: AVENTURA, FL 33180

Title: MGRM  
Name: JONATHAN RAJNERMAN  
Address: 2875 N.E. 191ST STREET, STE 801  
City-St-Zip: AVENTURA, FL 33180

Title: MGRM  
Name: MARTIN RAJNERMAN  
Address: 2875 N.E. 191ST STREET, STE 801  
City-St-Zip: AVENTURA, FL 33180

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: JORGE D RAJNERMAN

MGRM

03/25/2011

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