

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000035576

Entity Name: L & F SOUTH FLORIDA, LLC

**FILED**  
**Apr 14, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

19370 COLLINS AVENUE #903  
SUNNY ISLES BEACH, FL 33160

**New Principal Place of Business:**

19370 COLLINS AVENUE  
903  
SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:**

19370 COLLINS AVENUE #903  
SUNNY ISLES BEACH, FL 33160

**New Mailing Address:**

19370 COLLINS AVENUE  
903  
SUNNY ISLES BEACH, FL 33160

FEI Number: 42-1770910

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FINKELBERG, CHRISTIAN  
20801 BISCAYNE BLVD., #403  
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: LOPEZ FINKELBERG, OLGA R  
Address: 19370 COLLINS AVENUE # 903  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: MGRM  
Name: FINKELBERG, ROMINA P  
Address: 19370 COLLINS AVENUE # 903  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

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: ROMINA FINKELBERG

MGRM

04/14/2011

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