

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000109423

FILED  
Mar 03, 2011  
Secretary of State

Entity Name: ALIZES TWO LLC

**Current Principal Place of Business:**

1945 S. OCEAN DRIVE  
2114  
HALLANDALE BEACH, FL 33009

**New Principal Place of Business:**

**Current Mailing Address:**

1945 S. OCEAN DRIVE  
2114  
HALLANDALE BEACH, FL 33009

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

GENDRE, ANTOINE  
1945 S OCEAN DRIVE  
2114  
HALLANDALE BEACH, FL 33009 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: MRG  
Name: DE FALGUIERES, WALDEMAR  
Address: 1945 S OCEAN DRIVE, UNIT 2114  
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: MGR  
Name: DE FALGUIERES, CORINNE  
Address: 1945 S OCEAN DRIVE UNIT 2114  
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: MGR  
Name: DE FALGUIERES, ALEXANDRA  
Address: 1945 S OCEAN DRIVE APT 2114  
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: MGR  
Name: DE FALGUIERES, CYRIAQUE  
Address: 1945 S OCEAN DRIVE APT 2114  
City-St-Zip: HALLANDALE BEACH, FL 33009

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: WALDEMAR DE FALGUIERES

MGMR

03/03/2011

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