

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000066866

Entity Name: AB COLLINS 5 LLC

**FILED**  
**Apr 08, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

150 SUNNY ISLES BLVD.  
SUNNY ISLES BEACH, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

150 SUNNY ISLES BLVD.  
SUNNY ISLES BEACH, FL 33160

**New Mailing Address:**

17700 COLLINS AVE  
SUNNY ISLES BEACH, FL 33160

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

AMIR, AVIRAM  
150 SUNNY ISLES BLVD.  
STE 905  
SUNNY ISLES BEACH, FL 33160 US

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

SHELOMOVITZ, BARRY  
17700 COLLINS AVE  
SUNNY ISLES BEACH, FL 33160 US

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: BARRY SHELOMOVITZ

04/08/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SHELOMOVITZ, BARRY  
Address: 17700 COLLINS AVE  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: MGRM  
Name: AMIR, AVIRAM  
Address: 150 SUNNY ISLES BLVD.  
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: BARRY SHELOMOVITZ

MGRM

04/08/2012

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