

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L98000000271

Entity Name: CLARIDGE HOTEL LC

**FILED**  
**Feb 18, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

3500 COLLINS AVENUE  
MIAMI BEACH, FL 33131

**New Principal Place of Business:**

3500 COLLINS AVENUE  
MIAMI BEACH, FL 33140

**Current Mailing Address:**

3500 COLLINS AVENUE  
MIAMI BEACH, FL 33131

**New Mailing Address:**

3500 COLLINS AVENUE  
MIAMI BEACH, FL 33140

FEI Number: 65-0816258

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ORTIZ, EVARISTO A  
354 SEVILLA AVE  
CORAL GABLES, FL 33134 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: ALCOTT LIMITED  
Address: HODGE PLAZA 2ND FL. UPPER MAIN ST.  
City-St-Zip: WICKNAMS I TORTOLA B.U.S.,

Title: MGRM  
Name: WESTMORE LIMITED  
Address: HODGE PLAZA 2ND FL. UPPER MAIN ST.  
City-St-Zip: WICKNAMS I TORTOLA B.U.S.,

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: JEFF H. LEHMAN

G.M.

02/18/2010

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