

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000000964

FILED
Mar 10, 2009
Secretary of State

Entity Name: CARIBBEAN PROPERTY SERVICES LLC

Current Principal Place of Business:

5589 OKEECHOBEE BLVD
SUITE 201
WEST PALM BEACH, FL 33417

New Principal Place of Business:

Current Mailing Address:

5589 OKEECHOBEE BLVD
SUITE 201
WEST PALM BEACH, FL 33417

New Mailing Address:

FEI Number: 13-4245753

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZIPPIN, STANLEY R
5589 OKEECHOBEE BLVD
SUITE 201
WEST PALM BEACH, FL 33417 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: MGR () Delete
Name: BREEMAN, BARRY
Address: 1114 AVE OF THE AMERICAS 45TH FLOOR
City-St-Zip: NEW YORK, NY 10036

Title: MGR () Delete
Name: LIPSCHUTZ, MARK
Address: 1114 AVENUE OF THE AMERICAS
City-St-Zip: NEW YORK, NY 10036

Title: MGR () Delete
Name: MANSBACH, PETER
Address: 1114 AVENUE OF THE AMERICAS
City-St-Zip: NEW YORK, NY 10036

Title: MGR () Delete
Name: LEFKOWITZ, MICHAEL
Address: 1114 AVE OF THE AMERICAS 45TH FLOOR
City-St-Zip: NEW YORK, NY 10036

Title: MGR () Delete
Name: ZIPPIN, STANLEY R
Address: 5589 OKEECHOBEE BLVD SUITE 201
City-St-Zip: WEST PALM BEACH, FL 33417

Title: MGR () Delete
Name: BLATT, KENNETH
Address: 1114 AVE OF THE AMERICAS 45TH FL
City-St-Zip: NEW YORK, NY 10036

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: STAN ZIPPIN

MGR

03/10/2009

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