

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000000007

Entity Name: FMSC LEASEHOLD LLC

FILED
May 15, 2009
Secretary of State

Current Principal Place of Business:

1680 MICHIGAN AVENUE
736
MIAMI BEACH, FL 33139

New Principal Place of Business:

1055 NE 125TH STREET
NORTH MIAMI, FL 33161

Current Mailing Address:

1680 MICHIGAN AVENUE
736
MIAMI BEACH, FL 33139

New Mailing Address:

1055 NE 125TH STREET
NORTH MIAMI, FL 33161

FEI Number: 20-1420180 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH, LTD., INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

MICHAEL I. BERNSTEIN, P.A.
1688 MERIDIAN AVENUE
SUITE #786
MIAMI BEACH, FL 33139 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: MICHAEL I. BERNSTEIN, ESQ.

05/15/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: KLEIN, AVI
Address: 1680 MICHIGAN AVENUE, SUITE 736
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: KLEIN, AVI
Address: 1055 NE 125TH STREET
City-St-Zip: NORTH MIAMI, FL 33161

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: AVI KLEIN

MGR

05/15/2009

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