2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 26, 2009
Secretary of State

DOCUMENT# M07000004324

Entity Name: NORTH LAKE SHOPPES, LLC

Current Principal Place of Business:

2627 S. BAY SHORE DRIVE
UNIT #1906
MIAMI, FL 33133

New Principal Place of Business:

Current Mailing Address:

2627 S. BAY SHORE DRIVE
UNIT #1906
MIAMI, FL 33133

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:

DEL VALLE, MARIA CRISTINA ESQ
201 ALHAMBRA CIRCLE
SUNTRUST BUILDING - SUITE 601
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

KRONFLE, MARIELLA J
2627 SOUTH BAYSHORE DRIVE
APT # 1906
MIAMI, FL 33133 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: MARIELLA KRONFLE 01/26/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: KRONFLE DI-PUGLIA, MARIELLA
Address: 2627 SOUTH BAYSHORE DRIVE #1906
City-St-Zip: MIAMI, FL 33133

Title: MGR ( ) Delete
Name: VALENTINI, BARBARA
Address: 2627 SOUTH BAYSHORE DRIVE #1906
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: KRONFLE DI-PUGLIA, MARIELLA J
Address: 2627 SOUTH BAYSHORE DRIVE #1906
City-St-Zip: MIAMI, FL 33133

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: MARIELLA KRONFLE MGR 01/26/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date