

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M07000004446

**FILED**  
**Feb 16, 2010**  
**Secretary of State**

**Entity Name:** SEABREEZE PARTNERS, LLC

**Current Principal Place of Business:**

19111 COLLINS AVENUE  
# 1807  
SUNNY ISLES BEACH, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

19111 COLLINS AVENUE  
# 1807  
SUNNY ISLES BEACH, FL 33160

**New Mailing Address:**

**FEI Number:** 27-0042326

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ERLIKH, LEONID  
19111 COLLINS AVENUE, #1807  
SUNNY ISLES BEACH, FL 33160 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:** ERLIKH, LEONID  
**Address:** 19111 COLLINS AVENUE, #1807  
**City-St-Zip:** SUNNY ISLES BEACH, FL 33160

**Title:** MGRM  
**Name:** ERLIKH, FAINA  
**Address:** 19111 COLLINS AVENUE, #1807  
**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:** LEONID ERLIKH

MGRM

02/16/2010

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