## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M08000001937

Entity Name: THE MIDTOWN NIKI GROUP, LLC

3655 NOBEL DRIVE, SUITE 650

SAN DIEGO, CA 92122

Address: City-St-Zip: FILED May 12, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3655 NOBEL DRIVE, SUITE 650 SAN DIEGO, CA 92122 **Current Mailing Address: New Mailing Address:** 3655 NOBEL DRIVE, SUITE 650 SAN DIEGO, CA 92122 FEI Number: 27-0065607 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: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete MALK, BRIAN C Name: Name: Address: 3655 NOBEL DRIVE, SUITE 650 Address: City-St-Zip: SAN DIEGO, CA 92122 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: ZARCADES, PETER A Name: Address: 3655 NOBEL DRIVE, SUITE 650 Address: City-St-Zip: SAN DIEGO, CA 92122 City-St-Zip: Title: MGR () Delete Title: () Change () Addition PHINNEY, CHERI Name: Name: 3655 NOBEL DRIVE, SUITE 650 Address: Address: City-St-Zip: SAN DIEGO, CA 92122 City-St-Zip: Title: MGR ( ) Delete Title: () Change () Addition TRAKMAN, DAVID Name: Name: 3655 NOBEL DRIVE, SUITE 650 Address: Address: City-St-Zip: SAN DIEGO, CA 92122 City-St-Zip: Title: MGR () Delete Title: () Change () Addition HEDRICK, RAYMOND Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: PETER A ZARCADES MGR 05/12/2009