

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000010835

Entity Name: BRANDCOM, LLC

FILED
May 01, 2007
Secretary of State

Current Principal Place of Business:

4230 S.W. 11 ST.
MIAMI, FL 33134

New Principal Place of Business:

816 N.W. 11 ST.
703
MIAMI, FL 33136

Current Mailing Address:

4230 S.W. 11 ST.
MIAMI, FL 33134

New Mailing Address:

FEI Number: 65-1042449 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:

CANDELA, GRACIA E MGR
4230 S.W. 11 ST.
MIAMI, FL 33134 US

Name and Address of New Registered Agent:

CANDELA, GRACIA E MGR
816 N.W. 11 ST.
703
MIAMI, FL 33136 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: _____

05/01/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CANDELA, GRACIA E MGR
Address: 4230 S.W. 11 ST.
City-St-Zip: MIAMI, FL 33134

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CANDELA, GRACIA E MGR
Address: 816 N.W. 11 ST. # 703
City-St-Zip: MIAMI, FL 33136

Title: MGR () Change (X) Addition
Name: MOSQUEDA, FELIX J MGR
Address: 816 N.W. 11 ST. #703
City-St-Zip: MIAMI, FL 33136

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: GRACIA ELENA CANDELA

MGR

05/01/2007

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