

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000011655

Entity Name: PROQUIBER 2000, LLC

FILED
Apr 24, 2009
Secretary of State

Current Principal Place of Business:

10800 NW 21ST STREET
UNIT 200
MIAMI, FL 33172

Current Mailing Address:

10800 NW 21ST STREET
UNIT 200
MIAMI, FL 33172

New Principal Place of Business:

2199 PONCE DE LEON BOULEVARD
SUITE 301
CORAL GABLES, FL 33134 US

New Mailing Address:

2199 PONCE DE LEON BOULEVARD
SUITE 301
CORAL GABLES, FL 33134 US

FEI Number: 65-1043731

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEWART AGENT SERVICES
2199 PONCE DE LEON BLVD.,
SUITE 301
CORAL GABLES, FL 33134 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: MVP () Delete
Name: STINSON, JR., LOUIS
Address: 2199 PONCE DE LEON BLVD., SUITE 301
City-St-Zip: CORAL GABLES, FL 33134

Title: AS () Delete
Name: JORDAN, KATHY
Address: 2199 PONCE DE LEON BLVD., SUITE 301
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LOUIS STINSON, JR.

MVP

04/24/2009

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