2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000049948

Current Principal Place of Business:

City-St-Zip:

Title:

Title:

Name:

Address: City-St-Zip:

Name:

Address:

City-St-Zip:

MIAMI, FL 33161

MIAMI, FL 33161

NEPO, NORMAN

MIAMI, FL 33161

BEZAHLER, DONALD

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10800 BISCAYNE BLVD. 10TH FLOOR

10800 BISCAYNE BLVD. 10TH FLOOR

MGR

MGR

Entity Name: MERCHANTADVANTAGE LLC

FILED Apr 01, 2008 Secretary of State

New Principal Place of Business:

10800 BISCAYNE BLVD. 10TH FLOOR 10800 BISCAYNE BLVD. MIAMI, FL 33161 10TH FLOOR MIAMI, FL 33161 **Current Mailing Address: New Mailing Address:** 10800 BISCAYNE BLVD. 10TH FLOOR 10800 BISCAYNE BLVD. MIAMI, FL 33161 10TH FLOOR MIAMI, FL 33161 FEI Number: 20-3123931 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: LEVINE, AMY LEVINE, AMY 10800 BISCAYNE BLVD. 10TH FLOOR 10800 BISCAYNE BLVD. MIAMI, FL 33161 US 10TH FLOOR MIAMI, FL 33161 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: AMY LEVINE 04/01/2008 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete LAMBERT, MICHAEL Name: Name: 10800 BISCAYNE BLVD. 10TH FLOOR Address: Address: City-St-Zip: MIAMI, FL 33161 City-St-Zip: Title: MGR Title: () Delete () Change () Addition NEPO, ANNE Name: Name: Address: 10800 BISCAYNE BLVD. 10TH FLOOR Address: City-St-Zip: MIAMI, FL 33161 City-St-Zip: Title: MGR () Delete Title: () Change () Addition RYAN, NANCY Name: Name: 10800 BISCAYNE BLVD. 10TH FLOOR Address: Address:

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.

City-St-Zip:

() Change () Addition

() Change () Addition

Title:

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

SIGNATURE: MICHAEL LAMBERT MGR 04/01/2008