

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000047773

FILED
Feb 06, 2008
Secretary of State

Entity Name: BULLTICK FINANCIAL SERVICES, LLC

Current Principal Place of Business:

701 BRICKELL AVE., SUITE 2550
MIAMI, FL 33131

New Principal Place of Business:

701 BRICKELL AVENUE
SUITE 2550
MIAMI, FL 33131

Current Mailing Address:

701 BRICKELL AVE., SUITE 2550
MIAMI, FL 33131

New Mailing Address:

701 BRICKELL AVENUE
SUITE 2550
MIAMI, FL 33131

FEI Number: 20-5512741

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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: MGR () Delete
Name: DEL CUETO, ADOLFO
Address: 701 BRICKELL AVENUE 2550
City-St-Zip: MIAMI,, FL 33131 US

Title: MGR () Delete
Name: GUERRA, LUIS ALBERTO
Address: 701 BRICKELL AVENUE 2550
City-St-Zip: MIAMI, FL 33131 US

Title: MGR () Delete
Name: GUERRA, JAVIER
Address: 701 BRICKELL AVENUE 2550
City-St-Zip: MIAMI, FL 33131 US

Title: MGR () Delete
Name: FRANCO, ALBERTO
Address: 701 BRICKELL AVENUE 2550
City-St-Zip: MIAMI, FL 33131 US

Title: MGR () Delete
Name: CREIXELL, ALEJANDRO
Address: 701 BRICKELL AVENUE 2550
City-St-Zip: MIAMI, FL 33131 US

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

ADDITIONS/CHANGES:

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

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

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

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

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

Title: MGR () Change (X) Addition
Name: HERRERA, WILLIAM A
Address: 701 BRICKELL AVENUE 2550
City-St-Zip: MIAMI, FL 33131

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: ADOLFO DEL CUETO

MGR

02/06/2008

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