2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 04, 2009
Secretary of State

DOCUMENT# L06000047773

Entity Name: BULLTICK FINANCIAL SERVICES, LLC

Current Principal Place of Business:

701 BRICKELL AVENUE
SUITE 2550
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

701 BRICKELL AVENUE
SUITE 2550
MIAMI, FL 33131

New Mailing Address:

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

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:	( ) 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: ADOLFO DEL CUETO MGR 02/04/2009

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