

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
Mar 16, 2009
Secretary of State**

DOCUMENT# L08000061769

Entity Name: SEGUROS Y PRODUCTOS FINANCIEROS USA LLC

Current Principal Place of Business:

255 ALHAMBRA CIRCLE
SUITE 715
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

255 ALHAMBRA CIRCLE
SUITE 715
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 26-2857038 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VINA, GEORGE F
255 ALHAMBRA CIRCLE
SUITE 715
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: MGRM () Delete
Name: BLANCO, PLACIDO
Address: 2600 S. DOUGLAS ROAD #800
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR () Delete
Name: VINA, GEORGE F
Address: 255 ALHAMBRA CIRCLE #715
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BLANCO, PLACIDO
Address: 2655 LE JEUNE RD, PENTHOUSE 1B
City-St-Zip: CORAL GABLES, FL 33134

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: GEORGE F. VINA

MGR

03/16/2009

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