

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000051812

FILED
Apr 25, 2011
Secretary of State

Entity Name: EPIC 5208, LLC

Current Principal Place of Business:

2121 PONCE DE LEON BLVD
SUITE 1050
CORAL GABLES, FL 33134 US

New Principal Place of Business:

Current Mailing Address:

2121 PONCE DE LEON BLVD
SUITE 1050
CORAL GABLES, FL 33134 US

New Mailing Address:

FEI Number: 27-2570183

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONSULTING SERVICE OF SOUTH FLORIDA, INC.
2121 PONCE DE LEON BLVD
1050
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: MGR
Name: SOGNO BVBA
Address: 2121 PONCE DE LEON BLVD SUITE 1050
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGRM
Name: VERSCHUEREN, EMMANUEL
Address: 2121 PONCE DE LEON BLVD SUITE 1050
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGR
Name: PFB, S.A.
Address: 2121 PONCE DE LEON BLVD SUITE 1050
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGRM
Name: BALCAEN, PAUL
Address: 2121 PONCE DE LEON BLVD SUITE 1050
City-St-Zip: CORAL GABLES, FL 33134 US

I hereby 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: EMMANUEL VERSCHUEREN

MGRM

04/25/2011

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