


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 07, 2008 08:00 AM
Secretary of State

DOCUMENT # L94000000049
 1. Entity Name
 BGF REPRESENTACIONES TURISTICAS, L.C.



Principal Place of Business 100 N. BISCAYNE BLVD., SUITE 3050 MIAMI, FL 33132	Mailing Address 100 N. BISCAYNE BLVD., SUITE 3050 MIAMI, FL 33132
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DO NOT WRITE IN THIS SPACE



03212008No Chg-LLC CR2E083 (12/07)

4. FEI Number 65-0464278	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

WISNIACKI, FABIAN
 100 N. BISCAYNE BLVD. #3050
 MIAMI, FL 33132

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

UN00000889460
 04/17/08-80022-010 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WISNIACKI, FABIAN 100 N. BISCAYNE BLVD. #3050 MIAMI, FL 33132
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Fabian Wisniacki **FABIAN WISNIACKI, MGR. 3/21/08**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #