


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 14, 2008 08:00 A
Secretary of State

DOCUMENT # M03000003153 1. Entity Name BROADSPAN SECURITIES LLC	
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Principal Place of Business 1401 BRICKELL AVENUE SUITE 930 MIAMI, FL 33131 US	Mailing Address 1401 BRICKELL AVENUE SUITE 930 MIAMI, FL 33131 US
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DO NOT WRITE IN THIS SPACE



01032008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 75-3124661	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**GERRARD, MICHAEL L
1401 BRICKELL AVENUE
SUITE 930
MIAMI, FL 33131**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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

U00000896111
04/24/08-80095-012 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ANDRADE, FELIPE N.P. 1401 BRICKELL AVENUE SUITE 930 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CHIOSSONE, ORLANDO A 1401 BRICKELL AVENUE SUITE 930 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GERRARD, MICHAEL L 1401 BRICKELL AVENUE SUITE 930 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SEINER, DANIEL 1401 BRICKELL AVENUE SUITE 930 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DAVIS, TIMOTHY W 1401 BRICKELL AVENUE SUITE 930 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR VALDES-FAULI, GONZALO 1401 BRICKELL AVENUE SUITE 930 MIAMI, FL 33131

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IN THIS SPACE**

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:  **MICHAEL L. GERRARD** **3/11/08** **305 424 3400**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #