

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L07000090827

FILED
Aug 13, 2008
Secretary of State**Entity Name:** CELISTICS, LLC**Current Principal Place of Business:**17701 BISCAYNE BLVD, SUITE 300
AVENTURA, FL 33160**New Principal Place of Business:****Current Mailing Address:**5805 BLUE LAGOON DR, SUITE 200
MAIMI, FL 33126**New Mailing Address:****FEI Number:** 26-0846703**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**AG CORPORATE SERVICES, LLC
5805 BLUE LAGOON DR
STE 200
MIAMI, FL 33126 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: FIKSMAN, LEON FERNANDO
Address: 17501 BISCAYNE BLVD STE 510
City-St-Zip: AVENTURA, FL 33160

Title: MGR () Delete
Name: STOLO ZARLENGA, MARTIN IGNACIO
Address: 17501 BISCAYNE BLVD STE 510
City-St-Zip: AVENTURA, FL 33160

Title: MGR (X) Delete
Name: LOPEZ MENDEZ, JOSE MARIA
Address: 17501 BISCAYNE BLVD STE 510
City-St-Zip: AVENTURA, FL 33160

Title: MGR (X) Delete
Name: GONZALEZ, JUAN MANUEL
Address: 17501 BISCAYNE BLVD STE 510
City-St-Zip: AVENTURA, FL 33160

Title: MGR (X) Delete
Name: SARDINERO ROSCALES, JESUS
Address: 17501 BISCAYNE BLVD STE 510
City-St-Zip: AVENTURA, FL 33160

Title: MGR (X) Delete
Name: PICAZO TORRES, CARMEN
Address: 17501 BISCAYNE BLVD STE 510
City-St-Zip: AVENTURA, FL 33160

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: BIBLIOWICZ MITRANI, ALAIN TZVI
Address: 17501 BISCAYNE BLVD STE 510
City-St-Zip: AVENTURA, FL 33160

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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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: LEON FERNANDO FILKSMAN

MGR

08/13/2008

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