

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000038637

Entity Name: CTM HOLDINGS, LLC

FILED
Jan 08, 2009
Secretary of State

Current Principal Place of Business:

4030 SW 127 AVE
MIAMI, FL 33175

New Principal Place of Business:

13970 SW 18 TERRACE
MIAMI, FL 33175

Current Mailing Address:

4030 SW 127 AVE
MIAMI, FL 33175

New Mailing Address:

13970 SW 18 TERRACE
MIAMI, FL 33175

FEI Number: 56-2582105

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA, LUIS O
CITITRUST MORTGAGE CO.
4030 SW 127 AVENUE
MIAMI, FL 33175 US

Name and Address of New Registered Agent:

GARCIA, LUIS O
13970 SW 18 TERRACE
MIAMI, FL 33175 US

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: LUIS O. GARCIA

01/08/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GARCIA, LUIS O
Address: 13970 SW 18 TERRACE
City-St-Zip: MIAMI, FL 33175

Title: MGRM () Delete
Name: GARCIA, ALEXANDRA
Address: 13970 SW 18 TERRACE
City-St-Zip: MIAMI, FL 33175

Title: MGRM () Delete
Name: GARCIA, GABRIEL
Address: 13970 SW 18 TERRACE
City-St-Zip: MIAMI, FL 33175

Title: MGRM () Delete
Name: GARCIA, CHRISTA
Address: 13970 SW 18 TERRACE
City-St-Zip: MIAMI, FL 33175

ADDITIONS/CHANGES:

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

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

Title: () Change () Addition
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: LUIS O. GARCIA

PRE

01/08/2009

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