## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **FILED** Mar 21, 2007 8:00 am Secretary of State 03-21-2007 90161 041 \*\*\*\*50.00

1. Entity Nam	MENT # L02000000  FINANCIAL EXCHANGE S			03-21-20	007 90161 0	41 ****50.00		
Principal Place of Business 4425 PONCE DE LEON BLVD., 4TH FL CORAL GABLES, FL 33146		Mailing Address 4425 PONCE DE LEON BLVD., 4TH FL CORAL GABLES, FL 33146						
2. Principal Place of Business - No PO Box #		3. Mailing Address						
Suite, Apt. #, etc		Suite, Apt. #, etc			01102007 Chg-LLC	CR2E	083 (12/06)	
City & State		City & State			4. FEI Number 03-0373012		Applied Fo	
Zip	Country Zip C		Country		5. Certificate of Status Desi	red 🗌	\$5.00 Additional Fee Required	
	6. Name and Address of Current	Registered Agent		<u>'</u>	7. Name and Address of N	ew Registered	Agent	
				Name				
BOMSTEIN, BRIAN E 4425 PONCE DE LEON BLVD. 4TH FLOOR MIAM!, FL 33146			Stree	Street Address (P.O. Box Number is Not Acceptable)				
			City		FL Zıp Code			
	e named entity submits this statement fo tions of registered agent	r the purpose of changing its	registered offic	e or registere	d agent, or both, in the State	of Florida. 1 am	familiar with, and acc	ept
SIGNATURE .	Signature, typed or printed name of registered agent	und title if applicable (NOT	E Registerea Agent si	gnature required w	men reinstating)	DATE		
Filing Fee is \$50.00 Due by May 1, 2007					. FI	Make check   orida Departn	•	
9.	· MANAGING MEMBE	RS/MANAGERS	10.	<del></del>	ADDITI	ONS/CHANGE	S	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ERTEL, DAVID 4425 PONCE DE LEON BLVD., 4 CORAL GABLES, FL 33146	☐ Delete	TITLE NAME STREET ADDRE CITY-ST-ZIP	SS			Change Add	lition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P QUINT, DAVID 4425 PONCE DE LEON BLVD., CORAL GABLES, FL 33146	☐ Delete	TITLE NAME STREET ADDRE CITY-ST-ZIP	SS			☐ Change ☐ Add	lition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP O'BRIEN, RICHARD 4425 PONCE DE LEON BLVD., 4 CORAL GABLES, FL 33146	□ Celete	TITLE NAME STREET ADORE CITY-ST-ZIP				☐ Change ☐ Add	
TITLE NAME STREET ADDRESS	SVP BOMSTEIN, BRIAN E	☐ Delete	TITLE NAME STREET ADDRE	5v/5 807 443	STEIN, BRIA 5 PUNCE de	N E. Lean Blu	Change Add	lition
CITY-ST-ZIP	4425 PONCE DE LEON BLVD., 4 CORAL GABLES, FL 33146		CITY-ST-ZIP	COR	AL GABLE	S, EL	. 33146	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	CITY-ST-ZIP  TITLE  NAME  STREET ADDRE  CITY-ST-ZIP	\$V150 \$V150 \$\displays	STEIN, BRIA SPUNCE de LAL GABLE JOHR, RUBELT 15 PUNCE de RAL GABLE	S, FL Leon B S, FL	27145	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	CORAL GABLES, FL 33146  SVPT  WEGNER, ROBERT A  4425 PONCE DE LEON BLVD	Delete  4TH FL  Delete	TITLE NAME STREET ADDRE CITY-ST-ZIP TITLE NAME STREET ADDRE CITY-ST-ZIP	SS	KBL WHILL	3, 16.	Change Add	dition

ustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

DAVID ELTEL, MANGIG

## ATTACHMENT

60026860 BAYVIEW FINANCIAL EXCHANGE SERVICS, LLC 10. DOCUMENT NØ. L02000000467 Addition Change TITLE MISHCON, ADAM NAME 4425 PONCE DE LEON BLVD., 4<sup>TH</sup> FLOOR STREET ADDRESS CORAL GABLES, FL 33146 CITY-ST-ZIP Change Addition TITLE WAYNER, STEPHEN A. NAME 4425 PONCE DE LEON BLVD., 4<sup>TH</sup> FLOOR STREET ADDRESS CITY-ST-ZIP CORAL GABLES, FL 33146 V/AS Change Addition TITLE CARR, JOHN NAME 4425 PONCE DE LEON BLVD., 4<sup>TH</sup> FLOOR STREET ADDRESS CORAL GABLES, FL 33146 CITY-ST-ZIP \_\_ Change Addition | TITLE CARRIGAN, EVE NAME 4425 PONCE DE LEON BLVD., 4<sup>TH</sup> FLOOR STREET ADDRESS CORAL GABLES, FL 33146 CITY-ST-ZIP V Change Addition | TITLE WILLIAMS, MARVIN NAME 4425 PONCE DE LEON BLVD., 4<sup>TH</sup> FLOOR STREET ADDRESS

CORAL GABLES, FL 33146

CITY-ST-ZIP