

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000024284

Entity Name: BANKERS MEETINGS LLC

FILED  
Jan 19, 2009  
Secretary of State

**Current Principal Place of Business:**

169 EAST FLAGLER ST.  
SUITE 1534  
MIAMI, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

169 EAST FLAGLER ST.  
SUITE 1534  
MIAMI, FL 33131

**New Mailing Address:**

FEI Number: 56-2293646

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

VIDAL, VICTOR L  
701 SW 27 AVE., #606  
MIAMI, FL 33135 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: HORACIO GIMENEZ ZAPI, OLA  
Address: 2828 SW 22 ST., #208  
City-St-Zip: MIAMI, FL 33145

Title: MGR ( ) Delete  
Name: IGNACIO GIMENEZ ZAPI, OLA  
Address: 2828 SW 22 ST., #208  
City-St-Zip: MIAMI, FL 33145

Title: MGR ( ) Delete  
Name: FERNANDO GIMENEZ ZAP, IOLA  
Address: 2828 SW 22 ST #208  
City-St-Zip: MIAMI, FL 33145

**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:

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: IGNACIO GIMENEZ ZAPIOLA

MGR

01/19/2009

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