

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000027126

Entity Name: SEC EQUITY LENDING LLC

FILED  
Apr 30, 2005  
Secretary of State

## Current Principal Place of Business:

3899 NW 7TH STREET  
MIAMI, FL 33126

## New Principal Place of Business:

1549 NE 123RD ST  
N MIAMI, FL 33181

## Current Mailing Address:

3899 NW 7TH STREET  
MIAMI, FL 33126

## New Mailing Address:

1549 NE 123RD ST  
N MIAMI, FL 33181

FEI Number: 20-0162553

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NAE, JOSE  
3899 NW 7TH STREET  
MIAMI, FL 33126 US

## Name and Address of New Registered Agent:

NAE, JOSE  
1549 NE 123RD ST  
MIAMI, FL 33126 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:

04/30/2005

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete  
Name: NAE, JOSE  
Address: 3899 NW 7TH STREET  
City-St-Zip: MIAMI, FL 33126

Title: MGR ( ) Delete  
Name: NAE, ALBERT  
Address: 3899 NW 7TH ST 203  
City-St-Zip: MIAMI, FL 33126

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: NAE, JOSE  
Address: 1549 NE 123RD ST  
City-St-Zip: N MIAMI, FL 33181

Title: MGR (X) Change ( ) Addition  
Name: NAE, ALBERT  
Address: 1549 NE 123RD ST  
City-St-Zip: N MIAMI, FL 33181

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ALBERT NAE

MGR

04/30/2005

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