

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000000519

FILED
Jul 23, 2008
Secretary of State

Entity Name: CLICK FORWARD MARKETING LLC

Current Principal Place of Business:

3211 PONCE DE LEON BLVD
SUITE 101
CORAL GABLES, FL 33134 US

New Principal Place of Business:

3211 PONCE DE LEON BLVD
SUITE 102
CORAL GABLES, FL 33134 US

Current Mailing Address:

3211 PONCE DE LEON BLVD
SUITE 101
CORAL GABLES, FL 33134 US

New Mailing Address:

3211 PONCE DE LEON BLVD
SUITE 102
CORAL GABLES, FL 33134 US

FEI Number: 75-3092477 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

STANCIOFF, ALEX C
3801 HARLANO STREET
CORAL GABLES, FL 33134 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: MGRM () Delete
Name: ARTHURS, GARY W MR.
Address: 1621 MICANOPY AVENUE
City-St-Zip: MIAMI, FL 33133 US

Title: MGRM () Delete
Name: STANCIOFF, ALEX C MR.
Address: 3801 HARLANO STREET
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGRM () Delete
Name: MISHKOVSKY, MILEN I MR.
Address: 1800 GRANADA BLVD
City-St-Zip: CORAL GABLES, FL 33134 US

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: ALEX STANCIOFF

MGRM

07/23/2008

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