## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # L03000010081

1. Entity Name

BRIGHTPOINT INVESTMENT GROUP, L.L.C.

Principal Place of Business

Mailing Address

1401 PONCE DE LEON BLVD., STE. 202 CORAL GABLES, FL 33134

1401 PONCE DE LEON BLVD., STE. 202 CORAL GABLES, FL 33134

FILED Apr 14, 2008 08:00 Al Secretary of State



03282008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number
14-1876279

Applied For
Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Regulred

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

BLANCO, JORGE E ESQ 1401 PONCE DE LEON BLVD., STE. 202 CORAL GABLES, FL 33134

## DO NOT WRITE IN THIS SPACE

8.	The above named entity submits this statement for the purpose of changing its register	pove named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept			
	the obligations of registered agent.				
Q1	IGNATI IDE				

(NOTE, Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 U00000897319 04/25/08-80042-021 138.75

9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME	MGRM LEAL, JOSE E			
-				
STREET ADDRESS	1401 PONCE DE LEON BLVD., STE. 202			
CITY-ST-ZIP	CORAL GABLES, FL 33134			
TITLE				
NAME				
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CITY-ST-ZIP				
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CITY-ST-ZIP				
11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes, I further certify that the information				

1. Inereby certify that the information supplied with this thing does not quality for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 certifying the provided that it is report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOSE C. Qa I

Jose E. Ga

4/11/02

te Daytima Phone #