2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 07, 2008 08:00 A
Secretary of State

DOCUMENT # L03000014756

1. Entity Name
21ST CENTURY FUTURES, LLC

Principal Place of Business	Mailing Address
925 SOUTH FEDERAL HIGHWAY SUITE 500 BOCA RATON, FL 33432 US	925 SOUTH FEDERAL HIGHWAY SUITE 500 BOCA RATON, FL 33432 US

DO NOT WRITE IN THIS SPACE

03312008 No Chg-LLC CR2E083 (12/07)

4. FEI Number
90-0081047

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

DIGEORGIA, JAMES M
925 SOUTH FEDERAL HIGHWAY
SUITE 500
BOCA RATON, FL 33432

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

04/18/08-80011-003 138.75

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	DIGEORGIA, JAMES M
STREET ADDRESS	708 COQUINA WAY
CITY-ST-ZIP	BOCA RATON, FL 33432
TITLE	MGR
NAME	WOLFE, SCOTT
STREET ADDRESS	6900 WESTCLIFF DRIVE STE 801
CITY-ST-ZIP	LAS VEGAS, NV 89145
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify 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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: James DiGeorgia 4/4/08 561-750-8483
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #