

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000029289

**FILED**  
**Jul 14, 2010**  
**Secretary of State**

**Entity Name:** THE EXPONENT GROUP, LLC

**Current Principal Place of Business:**

5005 COLLINS AVE  
PH 6  
MIAMI BEACH, FL 33140

**New Principal Place of Business:**

5005 COLLINS AVE  
1019  
MIAMI BEACH, FL 33140

**Current Mailing Address:**

5005 COLLINS AVE  
PH 6  
MIAMI BEACH, FL 33140

**New Mailing Address:**

5005 COLLINS AVE  
1019  
MIAMI BEACH, FL 33140

**FEI Number:** 20-0148777

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CASTALDO, LUIGIA (GINA)  
5005 COLLINS AVE  
PH 6  
MIAMI BEACH, FL 33140 US

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

CASTALDO, LUIGIA (GINA)  
5005 COLLINS AVE  
1019  
MIAMI BEACH, FL 33140 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:

07/14/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: NATOLI, FRANK PRESIDE  
Address: 5005 COLLINS AVE, 1019  
City-St-Zip: MIAMI BEACH, FL 33140

Title: MGR  
Name: CASTALDO, LUIGIA  
Address: 5005 COLLINS AVE 1019  
City-St-Zip: MIAMI BEACH, FL 33140

I hereby 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: LUIGIA CASTALDO

MGR

07/14/2010

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