

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000052614

Entity Name: 477 MANAGEMENT, L.L.C.

FILED
Jan 15, 2009
Secretary of State

Current Principal Place of Business:

10556 NW 26 ST
SUITE D-101
DORAL, FL 33172 US

New Principal Place of Business:

31 SE 5 STREET
SUITE 413
MIAMI, FL 33131 US

Current Mailing Address:

10556 NW 26 ST
SUITE D-101
DORAL, FL 33172 US

New Mailing Address:

31 SE 5 STREET
SUITE 413
MIAMI, FL 33131 US

FEI Number: 20-1371922

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CABANAS & ASSOCIATES, P.A.
10520 NW 26 ST
SUITE C 201
DORAL, FL 33172 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: MGR () Delete
Name: PROFETA, CONSTANZA L
Address: 10556 NW 26 ST - SUITE D 101
City-St-Zip: DORAL, FL 33172 US

Title: MGR () Delete
Name: GAVIRIA, JUAN C
Address: 10556 NW 26 STREET, SUITE D101
City-St-Zip: DORAL, FL 33172

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PROFETA, CONSTANZA L
Address: 31 SE 5 STREET, SUITE 413
City-St-Zip: MIAMI, FL 33131 US

Title: MGR (X) Change () Addition
Name: GAVIRIA, JUAN C
Address: 31 SE 5 STREET, SUITE 413
City-St-Zip: MIAMI, FL 33131 US

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: JUAN CARLOS GAVIRIA

MGR

01/15/2009

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