2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 15, 2009
Secretary of State

DOCUMENT# L04000057162

Entity Name: INTERNATIONAL BUSINESS GROUP, LLC

Current Principal Place of Business:

2199 PONCE DE LEON BLVD
SUITE 200
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

2199 PONCE DE LEON BLVD.
SUITE 200
CORAL GABLES, FL 33134

New Mailing Address:

2199 PONCE DE LEON BLVD
SUITE 200
CORAL GABLES, FL 33134

FEI Number: 20-1453698 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STUART-SMITH, MICHAEL F
2199 PONCE DE LEON BOULEVARD STE 200
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: PRES ( ) Delete
Name: GONZALEZ, ALFREDO
Address: 2199 PONCE DE LEON BLVD. SUITE 200
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRD ( ) Delete
Name: STUART-SMITH, MICHAEL
Address: 2199 PONCE DE LEON BLVD. SUITE 200
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

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: MICHAEL STUART-SMITH MGRD 01/15/2009

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