

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000084357

FILED  
Apr 28, 2006  
Secretary of State

Entity Name: SAGES COMPONENTS, LLC

**Current Principal Place of Business:**

5555 COLLINS AVE.  
# 4T  
MIAMI BEACH, FL 33140 US

**New Principal Place of Business:**

**Current Mailing Address:**

5555 COLLINS AVE.  
# 4T  
MIAMI BEACH, FL 33140 US

**New Mailing Address:**

FEI Number: 20-1939410

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

COOPER, GLENN M ESQ.  
1560 SAWGRASS CORPORATE PARKWAY, 4TH FLOOR  
SUNRISE, FL 33323 US

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

COOPER, GLENN M ESQ.  
150 SOUTH PINE ISLAND RD  
SUITE 105  
PLANTATION, FL 33324 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: GLENN COOPER

04/28/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: BERQUIER, CHRISTIAN  
Address: 142-176 AVENUE DE STALINGRAD  
City-St-Zip: COLOMBES, FR 92703 FR

Title: MGR ( ) Delete  
Name: GUENNOUN, ZAHRA  
Address: 5555 COLLINS AVE., # 4T  
City-St-Zip: MIAMI BEACH, FL 33140 US

**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 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: ZAHRA GUENNOUN

MGR

04/28/2006

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