2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 25, 2008
Secretary of State

DOCUMENT# L05000021738

Entity Name: QUAD INVESTMENTS LLC

Current Principal Place of Business:

8030 NW 159 TERRACE
MIAMI LAKES, FL 33016

New Principal Place of Business:

Current Mailing Address:

8030 NW 159 TERRACE
MIAMI LAKES, FL 33016

New Mailing Address:

FEI Number: 83-0437208 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CABANAS, VICTOR
8030 NW 159 TERRACE
MIAMI LAKES, FL 33016 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: MGRM ( ) Delete
Name: CABANAS, VICTOR
Address: 8030 NW 159 TERRACE
City-St-Zip: MIAMI LAKES, FL 33016

Title: MGRM ( ) Delete
Name: CABANAS, FERNANDO
Address: 8030 NW 159 TERRACE
City-St-Zip: MIAMI LAKES, FL 33016

Title: MGRM ( ) Delete
Name: CABANAS, HUMBERTO
Address: 8030 NW 159 TERRACE
City-St-Zip: MIAMI LAKES, FL 33016

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: VICTOR CABANAS MGRM 04/25/2008

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