

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000030384

**FILED**  
**Feb 09, 2010**  
**Secretary of State**

**Entity Name:** PEO VENTURES LLC

**Current Principal Place of Business:**

50 BISCAYNE BLVD.  
SUITE 5111  
MIAMI, FL 33132

**New Principal Place of Business:**

450 ALTON ROAD  
1810  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

50 BISCAYNE BLVD.  
SUITE 5111  
MIAMI, FL 33132

**New Mailing Address:**

450 ALTON ROAD  
1810  
MIAMI BEACH, FL 33139

**FEI Number:** 20-5057770

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MANSOUR, PAULO  
50 BISCAYNE BLVD.  
SUITE 5111  
MIAMI, FL 33132 US

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

MANSOUR, PAULO  
450 ALTON ROAD  
1810  
MIAMI BEACH, FL 33139 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: \_\_\_\_\_

02/09/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MANSOUR, PAULO  
Address: 450 ALTON ROAD, # 1810  
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGR  
Name: MANSOUR, OMAR  
Address: 450 ALTON ROAD, # 1810  
City-St-Zip: MIAMI BEACH, FL 33139

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: PAULO MANSOUR

MGRM

02/09/2010

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