

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000072892

Entity Name: 5134 FID, LLC

FILED
Apr 24, 2008
Secretary of State

Current Principal Place of Business:

800 BRICKELL AVE., SUITE 103
MIAMI, FL 33131

New Principal Place of Business:

800 BRICKELL AVE., SUITE 100
MIAMI, FL 33131

Current Mailing Address:

800 BRICKELL AVE., SUITE 103
MIAMI, FL 33131

New Mailing Address:

800 BRICKELL AVE., SUITE 100
MIAMI, FL 33131

FEI Number: 26-2447969

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ATRIUM REGISTERED AGENTS, INC.
1500 SAN REMO AVE., SUITE 125
CORAL GABLES, FL 33146 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: VURGAIT, DAVID MGR
Address: 800 BRICKELL AVENUE SUITE 103
City-St-Zip: MIAMI, FL 33131

Title: MGR () Delete
Name: TURNES, JOE
Address: 800 BRICKELL AVENUE SUITE 103
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: VURGAIT, DAVID MGR
Address: 800 BRICKELL AVENUE SUITE 100
City-St-Zip: MIAMI, FL 33131

Title: MGR (X) Change () Addition
Name: TURNES, JOE
Address: 800 BRICKELL AVENUE SUITE 100
City-St-Zip: MIAMI, FL 33131

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: DAVID VURGAIT

MGR

04/24/2008

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