

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000074009

FILED
Sep 19, 2008
Secretary of State

Entity Name: INTERNATIONAL ALLIANCES, LLC

Current Principal Place of Business:

840 NE 20TH AVENUE
FORT LAUDERDALE, FL 33304 US

New Principal Place of Business:

10275 COLLINS AVENUE
SUITE 1107
BAL HARBOUR, FL 33154 US

Current Mailing Address:

840 NE 20TH AVENUE
FORT LAUDERDALE, FL 33304 US

New Mailing Address:

10275 COLLINS AVENUE
SUITE 1107
BAL HARBOUR, FL 33154 US

FEI Number: 20-4184604 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

LOVELL, ROSE ANN
840 NE 20TH AVENUE
FORT LAUDERDALE, FL 33304 US

Name and Address of New Registered Agent:

MOYAL, PATRICK
10796 PINES BLVD
SUITE 204
PEMBROKE PINES, FL 33026 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: PATRICK MOYAL

09/19/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DEVERT, GUY J
Address: 840 NE 20TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33304 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DEVERT, GUY J
Address: 10275 COLLINS AVENUE SUITE 1107
City-St-Zip: BAL HARBOUR, FL 33154 US

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: GUY DEVERT

MGRM

09/19/2008

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