

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000076595

FILED  
Apr 06, 2009  
Secretary of State

Entity Name: MICHAEL FARRELL TALENT, LLC.

## Current Principal Place of Business:

7000 ISLAND BLVD., UNIT 1405  
AVENTURA, FL 33160

## New Principal Place of Business:

7000 ISLAND BOULEVARD  
UNIT 1405  
AVENTURA, FL 33160 US

## Current Mailing Address:

601 BRICKELL KEY DRIVE, SUITE 507  
C/O IVAN A. GOMEZ, P.A.  
MIAMI, FL 33131

## New Mailing Address:

C/O IVAN A. GOMEZ, P.A.  
601 BRICKELL KEY DRIVE, SUITE 507  
MIAMI, FL 33131 US

FEI Number: 20-3328078

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

IAG CORPORATE SERVICES, INC.  
601 BRICKELL KEY DRIVE, SUITE 507  
MIAMI, FL 33131 US

## Name and Address of New Registered Agent:

IAG CORPORATE SERVICES, INC.  
601 BRICKELL KEY DRIVE  
SUITE 507  
MIAMI, FL 33131 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:

04/06/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: FARRELL, MICHAEL  
Address: 7000 ISLAND BLVD UNIT 1405  
City-St-Zip: AVENTURA, FL 33160

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: FARRELL, MICHAEL  
Address: 7000 ISLAND BOULEVARD, UNIT 1405  
City-St-Zip: AVENTURA, FL 33160 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: MICHAEL FARRELL

MGR

04/06/2009

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