

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000113799

FILED  
Aug 14, 2008  
Secretary of State

**Entity Name:** PRIME FINANCIAL INVESTMENT GROUP LLC

**Current Principal Place of Business:**

1075 SUNSET STRIP  
202  
SUNRISE, FL 33313

**New Principal Place of Business:**

1089 SUNSET STRIP  
SUNRISE, FL 33313

**Current Mailing Address:**

1075 SUNSET STRIP  
202  
SUNRISE, FL 33313

**New Mailing Address:**

1089 SUNSET STRIP  
SUNRISE, FL 33313

**FEI Number:** 84-1694954      **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:**

WHYLIE, JUANETTA  
1075 SUNSET STRIP  
202  
SUNRISE, FL 33313 US

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

WHYLIE, JUANETTA  
1089 SUNSET STRIP  
SUNRISE, FL 33313 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: JUANETTA WHYLIE

08/14/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: WHYLIE, JUANETTA  
Address: 6460 SW 15 COURT  
City-St-Zip: POMPAÑO BEACH, FL 33068

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: WHYLIE, JUANETTA  
Address: 1089 SUNSET STRIP  
City-St-Zip: SUNRISE, FL 33313

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: JUANETTA WHYLIE

MGR

08/14/2008

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