

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000121106

FILED
Apr 30, 2008
Secretary of State

Entity Name: OPPORTUNITY CENTURY, LLC

Current Principal Place of Business:

1111 BRICKELL AVENUE
SUITE 1129
MIAMI, FL 33131

New Principal Place of Business:

1111 BRICKELL AVENUE
SUITE 1147
MIAMI, FL 33131

Current Mailing Address:

1111 BRICKELL AVENUE
SUITE 1129
MIAMI, FL 33131

New Mailing Address:

1111 BRICKELL AVENUE
SUITE 1147
MIAMI, FL 33131

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRIED, MARK E
1110 BRICKELL AVENUE
SUITE 700
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

FRIED, MARK E
1110 BRICKELL AVENUE
SUITE 310
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: MARK E. FRIED

04/30/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MM VEST MANAGEMENT G, ROUP LTD
Address: 1330 WEST AVENUE, #1213
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM () Delete
Name: WILSON, ROBERT G
Address: 1111 BRICKELL AVE., STE. 1129
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: WILSON, ROBERT G
Address: 1111 BRICKELL AVE., STE. 1147
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: ROBERT WILSON

MGRM

04/30/2008

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