2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000028729

Entity Name: LRM CAPITAL, LLC

FILED Jan 10, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 630176 2600 ISLAND BLVD. MIAMI, FL 33163 APT. # 1201

MIAMI, FL 33160

Current Mailing Address: New Mailing Address:

P.O. BOX 630176 MIAMI, FL 33163

FEI Number: 20-4521582 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

MISHKIN, LORI R 2600 ISLAND BOULEVARD APT. 1201 AVENTURA, FL 33160 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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 MISHKIN, LORI R
 Name:

 Address:
 2600 ISLAND BOULEVARD, APT. 1201
 Address:

 City-St-Zip:
 MIAMI, FL 33160
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 PECKMAN, JODI
 Name:

 Address:
 145 EAST 62ND STREET, #2R
 Address:

 City-St-Zip:
 NEW YORK, NY 10021
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 PECKMAN, PAUL
 Name:

 Address:
 77-343 AVENIDA FERNANDO
 Address:

 City-St-Zip:
 LA QUINTA, CA 92253
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 ROGERS, SHEILA
 Name:

 Address:
 25 WEST 81ST, APT 14C
 Address:

 City-St-Zip:
 NEW YORK, NY 10024
 City-St-Zip:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

 Name:
 NEEDAM, EDWARD M
 Name:
 NEEDHAM, EDWARD M

 Address:
 P.O. BOX 630176
 Address:
 P.O. BOX 630176

 City-St-Zip:
 MIAMI, FL 33163
 City-St-Zip:
 MIAMI, FL 33163

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: LORI R. MISHKIN MS. 01/10/2009