## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED** Apr 14, 2008 08:00 All Secretary of State

## **DOCUMENT # L06000030176**

1. Entity Name

FTMI OPERATOR, LLC



Principal Place of Business

6401 S.W. 87TH AVENUE, SUITE 107

MIAMI, FL 33173

Mailing Address

6401 S.W. 87TH AVENUE, SUITE 107

MIAMI, FL 33173



DO NOT WRITE IN THIS SPACE

04092008 No Chg-LLC CR2E083 (12/07) Applied For 4. FEI Number 20-3852407 Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HACK, G. WILLIAM 6401 S.W. 87TH AVENUE, SUITE 107 MIAMI, FL 33173

the obligations of registered agent.

## DO NOT WRITE IN THIS SPACE

SIGNATURE.	mek 122 Li	1/8/8
Signature, typed or profes name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating)  FILE NOW!!! FEE IS \$138.75  After May 1, 2008 Fee will be \$538.75		
9.	MANAGING MEMBERS/MANAGERS	04/24/08-80064-019 138.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FTMI HOLDINGS, LLC 6401 S.W. 87TH AVENUE, SUITE 107 MIAMI, FL 33173	
NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CHY-ST-ZIP		
indicated	certify that the information supplied with this filling does not q on this report is true and accurate and that my signature sh bility company or the receiver or trustee empowered to exec	ualify for the exemptions contained in Chapter 119. Florida Statutes, I further certify that the information Il have the same legal effect as if made under oath; that I am a managing member or manager of the sie this report as required by Chapter 608, Florida Statutes.

8. 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. I am familiar with, and accept