

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000056007

FILED
Mar 30, 2009
Secretary of State

Entity Name: GORILLAS LIFESTYLE MARKETING, LLC

Current Principal Place of Business:

141 N.E. 3RD AVENUE
300
MIAMI, FL 33132

New Principal Place of Business:

3852 N. MIAMI AVE
MIAMI, FL 33137

Current Mailing Address:

1725 JAMES AVENUE
28
MIAMI BEACH, FL 33139

New Mailing Address:

3852 N. MIAMI AVE
MIAMI, FL 33137

FEI Number: 51-0584967

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VARGAS, JIMMY R
1725 JAMES AVENUE
28
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

BRITO, LUIS G
407 LINCOLN ROAD
SUITE 300
MIAMI BEACH, FL 33139 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: LUIS G. BRITO

03/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PIERRE, MAXIME N
Address: 855 EUCLID AVENUE #102
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGR () Delete
Name: VARGAS, JIMMY R
Address: 1725 JAMES AVENUE #28
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PIERRE, MAXIME N
Address: 3852 N. MIAMI AVE
City-St-Zip: MIAMI, FL 33137

Title: MGR (X) Change () Addition
Name: TESFAZGY, MILEN
Address: 3852 N. MIAMI AVE
City-St-Zip: MIAMI, FL 33137

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: MAXIME PIERRE

MGM

03/30/2009

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