


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 07, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000057702 1. Entity Name SEGA, LLC	
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Principal Place of Business 1550 MADRUGA AVENUE SUITE 240 CORAL GABLES, FL 33146	Mailing Address 1550 MADRUGA AVENUE SUITE 240 CORAL GABLES, FL 33146 US
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01032008No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-5012186	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GARCIA, PAUL A
 1550 MADRUGA AVENUE
 SUITE 240
 CORAL GABLES, FL 33146

DO NOT WRITE IN THIS SPACE

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 the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U00000775726
 01/08/08-30041-002 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ASES, LLC 7360 SW 24 ST., #34 MIAMI, FL 33155
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM NOVUS FINANCIAL GROUP, INC. 1550 MADRUGA AVE., SUITE 240 CORAL GABLES, FL 33146
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Paul A. Garcia Date: 1/2/08 Daytime Phone #: 305-662-7313