

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000061010

Entity Name: TERRAMAR FINANCIAL, LLC

FILED
Apr 21, 2008
Secretary of State

Current Principal Place of Business:

% ROLAND SANCHEZ-MEDINA JR.
2333 PONCE DE LEON BLVD., SUITE 302
CORAL GABLES, FL 33134

New Principal Place of Business:

ROLAND SANCHEZ-MEDINA JR.
2333 PONCE DE LEON BLVD., SUITE 302
CORAL GABLES, FL 33134

Current Mailing Address:

% ROLAND SANCHEZ-MEDINA JR.
2333 PONCE DE LEON BLVD., SUITE 302
CORAL GABLES, FL 33134

New Mailing Address:

ROLAND SANCHEZ-MEDINA JR.
2333 PONCE DE LEON BLVD., SUITE 302
CORAL GABLES, FL 33134

FEI Number: 20-5046178

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANCHEZ-MEDINA, ROLAND JR.
SANCHEZ-MEDINA & ASSOCIATES, P.A.
2333 PONCE DE LEON BLVD., SUITE 302
CORAL GABLE, FL 33134 US

Name and Address of New Registered Agent:

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:

Title: AS () Delete
Name: SANCHEZ-MEDINA JR., ROLAND
Address: 2333 PONCE DE LEON BLVD, SUITE 302
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES:

Title: AS (X) Change () Addition
Name: SANCHEZ-MEDINA JR., ROLAND
Address: 2333 PONCE DE LEON BLVD, SUITE 302
City-St-Zip: CORAL GABLES, FL 33134

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: ROLAND SANCHEZ-MEDINA JR.

AS

04/21/2008

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