2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
Mar 02, 2007
Secretary of State

DOCUMENT# L06000071408

Entity Name: SOLVENTC, LLC

Current Principal Place of Business:

3225 AVIATION AVENUE
SUITE 501
MIAMI, FL 33133 US

New Principal Place of Business:

Current Mailing Address:

3225 AVIATION AVENUE
SUITE 501
MIAMI, FL 33133 US

New Mailing Address:

FEI Number: 20-5224813 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

M.J.F. REGISTERED AGENT CORP.
153 SEVILLA AVENUE
CORAL GABLES, 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:	MGRM	( ) Delete
Name:	FREEMAN, LEWIS B	
Address:	3225 AVIATION AVENUE, SUITE 501	
City-St-Zip:	MIAMI, FL 33133	
Title:	MGRM	( ) Delete
Name:	WEISS, STUART	
Address:	3225 AVIATION AVENUE, SUITE 501	
City-St-Zip:	MIAMI, FL 33133	
Title:	MGRM	( ) Delete
Name:	LOTTERMAN, LAWRENCE	
Address:	3225 AVIATION AVENUE, SUITE 501	
City-St-Zip:	MIAMI, FL 33133	
Title:	MGRM	(X) Delete
Name:	MARVIN, THOMAS C	
Address:	3225 AVIATION AVENUE, SUITE 501	
City-St-Zip:	MIAMI, FL 33133	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS MARVIN MGRM 03/02/2007

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