

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000087215

FILED
Sep 23, 2009
Secretary of State

Entity Name: EUROGROUP EQUITY PARTNERS LLC

Current Principal Place of Business:

824 US HIGHWAY ONE
SUITE 320
NORTH PALM BEACH, FL 33408

New Principal Place of Business:

14 WALL STREET
20TH FLOOR
NEW YORK, NY 10005

Current Mailing Address:

824 US HIGHWAY ONE
SUITE 320
NORTH PALM BEACH, FL 33408

New Mailing Address:

14 WALL STREET
20TH FLOOR
NEW YORK, NY 10005

FEI Number: 26-1834912 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

TARANGELO, PETER
824 US HIGHWAY ONE
SUITE 320
NORTH PALM BEACH, FL 33408 US

Name and Address of New Registered Agent:

TARANGELO, PETER
4425 MILITARY TRAIL
102
JUPITER, FL 33458 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: PETER TARANGELO

09/23/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: TARANGELO, PETER
Address: 824 US HIGHWAY ONE
City-St-Zip: NORTH PALM BEACH, FL 33408

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: TARANGELO, PETER
Address: 14 WALL STREET, 20TH FLOOR
City-St-Zip: NEW YORK, NY 10005

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: PETER TARANGELO

MGRM

09/23/2009

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