## **2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT # L06000106463

## FILED Mar 12, 2008 8:00 am Secretary of State

03-12-2008 90236 020 \*\*\*138.75

FSY HOLDINGS LLC					
Principal Place of Business 1300 BRICKELL AVE. MIAMI, FL 33131		Mailing Address 1300 BRICKELL AVE. MIAMI, FL 33131		60014071	
2. Principal Plac	ce of Business - No P.O. Box #	3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02282008 Chg-LLC CR2E083 (12/06)	
City & State		City & State		4. FEI Number Applied For NOT APPLICABLE Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired Specificate of Status Desired Fee Required	
SANCHEZ, I 1300 BRICK MIAMI, FL 3		Registered Agent	Name. Street Addr	7. Name and Address of New Registered Agent  2. LOS Santos, Olga ESq.  3. Description of New Registered Agent  4. LOS Santos, Olga ESq.  5. Description of New Registered Agent  6. LOS Santos, Olga ESq.  6. Description of New Registered Agent  6. LOS Santos, Olga ESq.  6. Description of New Registered Agent  6. LOS Santos, Olga ESq.  7. LOS Santos, Olga ESq.  7. LOS Santos, Olga ESq.  8. LOS Santos, Olga E	
	M		City	iami FL 33131	
the obligation	ns of registered agent	the purpose of changing its	registered office or reg	istered agent, or both, in the State of Florida. I am familiar with, and accept $3/5/08$	
SIGNATURE	ignature, typed or plated agent a	and title if applicable. (NOTE	: Registered Agent signature re		
	NOW!!! FEE IS \$138.75 1, 2008 Fee will be \$538.75			Make check payable to Florida Department of State	
9.	MANAGING MEMBE	RS/MANAGERS	10.	ADDITIONS/CHANGES	
NAME STREET ADDRESS	<del>-la.</del> t.	☐ Delete	NAME DO STREET ADDRESS 1	GA  FFORTUNA, EDGARDO A.  BOO BLICKELL AVENUE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE M NAME DI STREET ADDRESS	GAMI FL 33131  GA Change PAddition  EFORTUNA, ANA C.  BOO BRICKELL AVENUE  LIAMI FL 33131	
NAME STREET ADDRESS CITY-ST-ZIP	-	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE			TITLE	☐ Change ☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	NAME STREET ADDRESS CITY-ST-ZIP		
NAME STREET ADDRESS		□ Delete	NAME STREET ADDRESS	☐ Change ☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP  11. [ hereby cerindicated or	rtify that the information supplied with n this report is true and agrurate and lity company or the receiver or trustee	☐ Delete  this filing does not qualify for that my signature shall have to	NAME STREET ADDRESS CITY-SI-ZIP  IIILE NAME STREET ADDRESS CITY-SI-ZIP  the exemptions containe same legal effect a	☐ Change ☐ Addition  The control of	