

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000113747

FILED
Apr 05, 2007
Secretary of State

Entity Name: BC INVESTMENT FAMILY GROUP, LLC

Current Principal Place of Business:

5040 N.W 7TH STREET, SUITE 690
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

5040 N.W 7TH STREET, SUITE 690
MIAMI, FL 33126

New Mailing Address:

FEI Number: 20-5952405 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BARRIOS, LUIS G
15831 SW 97TH AVENUE
MIAMI, FL 33157 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: MGR () Delete
Name: ALLEANZA MANAGEMENT, GROUP, INC.
Address: 8937 SW 214TH STREET
City-St-Zip: MIAMI, FL 33189

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ALLEANZA MANAGEMENT, GROUP, INC.
Address: 5040 NW 7TH STREET, SUITE 690
City-St-Zip: MIAMI, FL 33126

Title: MGR () Change (X) Addition
Name: BARRIOS, LUIS G
Address: 5040 NW 7 ST STREET, SUITE 690
City-St-Zip: MIAMI, FL 33126

Title: MGR () Change (X) Addition
Name: DE CORTADA, RAMON
Address: 5040 NW 7ST STREET, SUITE 690
City-St-Zip: MIAMI, FL 33126

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: RAMON DE CORTADA

MGR

04/05/2007

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