

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000115482

FILED
Apr 11, 2008
Secretary of State

Entity Name: BPSA LLC

Current Principal Place of Business:

9187 FONTAINEBLEAU BLVD., #3
MIAMI, FL 33172

New Principal Place of Business:

11251 SW 156 PLACE
MIAMI, FL 33196

Current Mailing Address:

9187 FONTAINEBLEAU BLVD., #3
MIAMI, FL 33172

New Mailing Address:

11251 SW 156 PLACE
MIAMI, FL 33196

FEI Number: 26-0343873

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORENO, ANGEL
9187 FONTAINEBLEAU BLVD., #3
MIAMI, FL 33172 US

Name and Address of New Registered Agent:

MORENO, ANGEL
11251 SW 156 PLACE
MIAMI, FL 33196 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:

04/11/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MORENO, ANGEL
Address: 9187 FONTAINEBLEAU BLVD., #3
City-St-Zip: MIAMI, FL 33172

Title: MGR () Delete
Name: CLINTON, STEPHEN
Address: 9187 FONTAINEBLEAU BLVD., #3
City-St-Zip: MIAMI, FL 33172

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MORENO, ANGEL
Address: 11251 SW 156 PLACE
City-St-Zip: MIAMI, FL 33196

Title: MGR (X) Change () Addition
Name: CLINTON, STEPHEN
Address: 11251 SW 156 PLACE
City-St-Zip: MIAMI, FL 33196

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: ANGEL MORENO

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04/11/2008

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