

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000119646

Entity Name: BG CORPORATE CENTER LLC

FILED  
Apr 26, 2009  
Secretary of State

**Current Principal Place of Business:**

3217 SOUTH ANDREWS AVE.  
FORT LAUDERDALE, FL 33316

**New Principal Place of Business:**

**Current Mailing Address:**

3219 SOUTH ANDREWS AVE.  
FORT LAUDERDALE, FL 33316

**New Mailing Address:**

FEI Number: 20-8314044

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SMALLBIZ AGENTS, LLC  
4244 W. TENNESSEE STREET #185  
TALLAHASSEE, FL 32304 US

**Name and Address of New Registered Agent:**

BRUNIER, JACQUES  
929 SW 18TH ST.  
FORT LAUDERDALE, FL 33315 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: JACQUES BRUNIER

04/26/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: BRUNIER, JACQUES  
Address: 929 SOUTH WEST 18TH STREET  
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: MGRM ( ) Delete  
Name: GAILLARD, JOCELYNE  
Address: 929 SOUTH WEST 18TH STREET  
City-St-Zip: FORT LAUDERDALE, FL 33316

**ADDITIONS/CHANGES:**

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 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: JACQUES BRUNIER

MGRM

04/26/2009

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