

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000005648

Entity Name: POTENTATUS, LLC

FILED  
Jan 15, 2008  
Secretary of State

## Current Principal Place of Business:

4649 PONCE DE LEON BOULEVARD  
SUITE 305  
CORAL GABLES, FL 33146

## New Principal Place of Business:

330 SW 27TH AVENUE  
SUITE 203  
MIAMI, FL 33135

## Current Mailing Address:

4649 PONCE DE LEON BOULEVARD  
SUITE 305  
CORAL GABLES, FL 33146

## New Mailing Address:

330 SW 27TH AVENUE  
SUITE 203  
MIAMI, FL 33135

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LAW OFFICE OF HERNAN HERNANDEZ, P.A.  
4649 PONCE DE LEON BOULEVARD, SUITE  
SUITE 305  
CORAL GABLES, FL 33146 US

## Name and Address of New Registered Agent:

LAW OFFICE OF HERNAN HERNANDEZ, P.A.  
330 SW 27TH AVENUE,  
SUITE 203  
MIAMI, FL 33135 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: HERNAN HERNANDEZ

01/15/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: HERNANDEZ, HERNAN  
Address: 4649 PONCE DE LEON BOULEVARD, STE 305  
City-St-Zip: CORAL GABLES, FL 33146 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: HERNANDEZ, HERNAN  
Address: 330 SW 27TH AVENUE,  
City-St-Zip: MIAMI, FL 33135 US

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: HERNAN HERNANDEZ

MM/M

01/15/2008

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