

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000006031

FILED
Jan 07, 2009
Secretary of State

Entity Name: LATIN2LATIN MARKETING + COMMUNICATIONS, LLC

Current Principal Place of Business:

333 LAS OLAS WAY
#2604
FORT LAUDERDALE, FL 33301 US

Current Mailing Address:

333 LAS OLAS WAY
#2604
FORT LAUDERDALE, FL 33301 US

New Principal Place of Business:

347 N. NEW RIVER DRIVE EAST
SUITE 100
FORT LAUDERDALE, FL 33301 US

New Mailing Address:

347 N. NEW RIVER DRIVE EAST
SUITE 100
FORT LAUDERDALE, FL 33301 US

FEI Number: 20-8262493

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

FIGUEROA, ARMINDA
347 N. NEW RIVER DRIVE EAST
SUITE 100
FORT LAUDERDALE, FL 33301 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: ARMINDA FIGUEROA

01/07/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FIGUEROA, ARMINDA
Address: 333 LAS OLAS WAY STE 2604
City-St-Zip: FORT LAUDERDALE, FL 33301 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: FIGUEROA, ARMINDA CEO
Address: 333 LAS OLAS WAY STE 2604
City-St-Zip: FORT LAUDERDALE, FL 33301 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: ARMINDA FIGUEROA

CEO

01/07/2009

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