

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000007881

Entity Name: BRYTE TELECOM, LLC

FILED  
Mar 22, 2009  
Secretary of State

**Current Principal Place of Business:**

7040 W. PALMETTO PARK RD. # 4  
SUITE # 700  
BOCA RATON, FL 33433 US

**New Principal Place of Business:**

**Current Mailing Address:**

7040 W. PALMETTO PARK RD. # 4  
SUITE # 700  
BOCA RATON, FL 33433 US

**New Mailing Address:**

FEI Number: 20-8292365

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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: OPASO, VICENTE  
Address: 7040 W. PALMETTO PARK RD. # 4 SUITE # 700  
City-St-Zip: BOCA RATON, FL 33433 US

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

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: OPASO, VICENTE  
Address: 7040 W. PALMETTO PARK RD. # 4 SUITE # 700  
City-St-Zip: BOCA RATON, FL 33433 US

Title: MGRM ( ) Change (X) Addition  
Name: SILVA, FRANCISCA I  
Address: 7040 W. PALMETTO PARK RD. # 4 SUITE # 700  
City-St-Zip: BOCA RATON, FL 33433 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: VICENTE OPASO

MGRM

03/22/2009

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