

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000059996

Entity Name: FACES TRADINGS LLC

FILED  
Jun 15, 2008  
Secretary of State

## Current Principal Place of Business:

701 THREE ISLANDS BLVD  
101  
HALLANDALE, FL 33009

## Current Mailing Address:

701 THREE ISLANDS BLVD  
101  
HALLANDALE, FL 33009

## New Principal Place of Business:

3301 PONCE DE LEON BLVD  
200  
CORAL GABLES, FL 33134

## New Mailing Address:

3301 PONCE DE LEON BLVD  
200  
CORAL GABLES, FL 33134

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

ALVARADO, BEATRIZ V  
701 THREE ISLANDS BLVD  
APT 408  
HALLANDALE, FL FL US

## Name and Address of New Registered Agent:

LEVY, ELI J  
3301 PONCE DE LEON BLVD  
200  
CORAL GABLES, FL FL 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: RICARDO PINES

06/15/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: ALVARADO, BEATRIZ V  
Address: 701 THREE ISLANDS BLVD APT 408  
City-St-Zip: HALLANDALE, FL 33009

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: LEVY, ELI J  
Address: 3301 PONCE DE LEON BLVD STE 200  
City-St-Zip: CORAL GABLES, FL 33134

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: ELI LEVY

MGRM

06/15/2008

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