

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000065150

FILED  
Jan 30, 2008  
Secretary of State

Entity Name: BLUE CONSULTING AND MARKETING, LLC

## Current Principal Place of Business:

261 NAVARRE AVENUE  
#305  
CORAL GABLES, FL 33134 US

## New Principal Place of Business:

## Current Mailing Address:

261 NAVARRE AVENUE  
#305  
CORAL GABLES, FL 33134 US

## New Mailing Address:

FEI Number: 26-0394786

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEYMARIE, SERGIO  
261 NAVARRE AVENUE  
#305  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

LEYMARIE, SERGIO L  
261 NAVARRE AVENUE  
#305  
CORAL GABLES, FL 33134 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: SERGIO LEYMARIE

01/30/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: LEYMARIE, SERGIO  
Address: 261 NAVARRE AVENUE, #305  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGRM ( ) Delete  
Name: TERAN, FEDERICO  
Address: 528 W. 49TH STREET  
City-St-Zip: MIAMI BEACH, FL 33140 US

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM (X) Change ( ) Addition  
Name: TERAN, FEDERICO  
Address: 901 BRICKELL KEY BLVD  
City-St-Zip: MIAMI, FL 33131 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: SERGIO LEYMARIE

MGRM

01/30/2008

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