

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000070620

FILED
Apr 28, 2008
Secretary of State

Entity Name: SPARTACUS CONSTRUCTION, LLC

Current Principal Place of Business:

1551 NE MIAMI GARDENS DRIVE
326
NORTH MIAMI BEACH, FL 33179

New Principal Place of Business:

Current Mailing Address:

1551 NE MIAMI GARDENS DRIVE
326
NORTH MIAMI BEACH, FL 33179

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JULIO-POCKELS, CESAR A MR.
1551 NE MIAMI GARDENS DRIVE
326
NORTH MIAMI BEACH, FL 33179 US

Name and Address of New Registered Agent:

JULIAO-POCKELS, CESAR A MR.
1551 NE MIAMI GARDENS DRIVE
326
NORTH MIAMI BEACH, FL 33179 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: CESAR A. JULIAO-POCKELS

04/28/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: FERRIOL, JUAN J
Address: 12472 SW 45TH DRIVE
City-St-Zip: MIRAMAR, FL 33027

Title: MGR () Delete
Name: JULIO-POCKELS, CESAR A
Address: 1551 NE MIAMI GARDENS DRIVE
City-St-Zip: NORTH MIAMI BEACH, FL 33179

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: JULIAO-POCKELS, CESAR A
Address: 1551 NE MIAMI GARDENS DRIVE
City-St-Zip: NORTH MIAMI BEACH, FL 33179

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: CESAR A. JULIAO-POCKELS

MGR

04/28/2008

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