

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000075448

FILED
Apr 30, 2009
Secretary of State

Entity Name: PRETORIAN INTERNATIONAL HOLDINGS, LLC

Current Principal Place of Business:

520 BRICKELL KEY DRIVE
SUITE O-301
MIAMI, FL 33131

New Principal Place of Business:

1000 BRICKELL AVENUE, SUITE 215
MIAMI, FL 33131

Current Mailing Address:

520 BRICKELL KEY DRIVE
SUITE O-301
MIAMI, FL 33131

New Mailing Address:

1000 BRICKELL AVENUE, SUITE 215
MIAMI, FL 33131

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

Name and Address of Current Registered Agent:

CORPORATE MAINTENANCE SERVICES LLC
520 BRICKELL KEY DRIVE
SUITE O-301
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

CORPORATE MAINTENANCE SERVICES LLC
1000 BRICKELL AVENUE, SUITE 215
MIAMI, FL 33131 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: _____

04/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MULTI-CORPORATE ADMINISTRATION INC, A BVI
Address: 520 BRICKELL KEY DRIVE, SUITE O-301
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MULTI-CORPORATE ADMINISTRATION INC, A BVI
Address: 1000 BRICKELL AVENUE, SUITE 215
City-St-Zip: MIAMI, FL 33131

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: MULTI CORPORATE ADMINISTRATION INC

MGR

04/30/2009

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