

**2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L07000086352

**FILED**  
**Feb 27, 2008**  
**Secretary of State****Entity Name:** IB CAPITAL VENTURES, L.L.C.**Current Principal Place of Business:**1000 BRICKELL AVENUE  
SUITE 1000  
MIAMI, FL 33131 US**New Principal Place of Business:****Current Mailing Address:**1000 BRICKELL AVENUE  
SUITE 1000  
MIAMI, FL 33131 US**New Mailing Address:****FEI Number:** 26-0774867      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**O'NAGHTEN, JUAN T  
2950 SW 27TH AVENUE  
SUITE 300  
MIAMI, FL 33133 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:** BENSADON, E. DAVID  
**Address:** 1000 BRICKELL AVENUE  
**City-St-Zip:** MIAMI, FL 33131 US**Title:**      ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:****ADDITIONS/CHANGES:****Title:**      ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** MGR      ( ) Change (X) Addition  
**Name:** BREA, JOSE RAMON  
**Address:** 1000 BRICKELL AVENUE  
**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: DAVID BENSADON

MGR

02/27/2008

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