

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000086352

FILED
Mar 30, 2009
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:

1200 BRICKELL AVENUE
SUITE 1700
MIAMI, FL 33131 US

Current Mailing Address:

1000 BRICKELL AVENUE
SUITE 1000
MIAMI, FL 33131 US

New Mailing Address:

1200 BRICKELL AVENUE
SUITE 1700
MIAMI, FL 33131 US

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: MGR () Delete
Name: BREA, JOSE RAMON
Address: 1000 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BENSADON, E. DAVID
Address: 1200 BRICKELL AVENUE, SUITE 1700
City-St-Zip: MIAMI, FL 33131 US

Title: MGR (X) Change () Addition
Name: BREA, JOSE RAMON
Address: 1200 BRICKELL AVENUE, SUITE 1700
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: E. DAVID BENSADON

MGR

03/30/2009

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