

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000017799

FILED
Apr 30, 2009
Secretary of State

Entity Name: MBH GLOBAL, LLC

Current Principal Place of Business:

7550 STERLING ROAD
SUITE C205
HOLLYWOOD, FL 33024

New Principal Place of Business:

Current Mailing Address:

7550 STERLING ROAD
SUITE C205
HOLLYWOOD, FL 33024

New Mailing Address:

FEI Number: 26-2160832 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALADRIGAS & LEAL, P.A.
3191 CORAL WAY
PH204
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

ONASSI VALDES
7550 STIRLING RD
C205
HOLLYWOOD, FL 33024 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: ONASSI VALDES

04/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: VALDES, ONASSI
Address: 7550 STERLING ROAD, SUITE C205
City-St-Zip: HOLLYWOOD, FL 33024 US

Title: MGR () Delete
Name: ALFONSO, ABEL
Address: 7550 STERLING ROAD, SUITE C205
City-St-Zip: HOLLYWOOD, FL 33024 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: VALDES, ONASSI
Address: 7550 STERLING ROAD, SUITE C205
City-St-Zip: HOLLYWOOD, FL 33024 US

Title: MGRM (X) Change () Addition
Name: ALFONSO, ABEL
Address: 7550 STERLING ROAD, SUITE C205
City-St-Zip: HOLLYWOOD, FL 33024 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: ONASSI VALDES

MGRM

04/30/2009

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