

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000023303

Entity Name: BLG GEOPROMOTION L.L.C.

FILED
Jan 16, 2009
Secretary of State

Current Principal Place of Business:

1379 RIVERSIDE CIRCLE
WELLINGTON, FL 33414

New Principal Place of Business:

Current Mailing Address:

1379 RIVERSIDE CIRCLE
WELLINGTON, FL 33414

New Mailing Address:

FEI Number: 80-0168628

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRUZ, LUIS H SR.
6190 SEVENSPRINGS BLVD.
GREENACRES, FL 33414 US

Name and Address of New Registered Agent:

RODRIGUEZ, GUSTAVO A SR.
1379 RIVERSIDE CIRCLE
WELLINGTON, FL 33414 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: GUSTAVO RODRIGUEZ

01/16/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CRUZ, BERNARDITA P MS
Address: 2110 POLO GARDENS DR. #205
City-St-Zip: WELLINGTON, FL 33414

Title: MGR () Delete
Name: RODRIGUEZ, GUSTAVO A SR.
Address: 2110 POLO GARDENS DR. #205
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CRUZ, BERNARDITA P MS
Address: 1379 RIVERSIDE CIRCLE
City-St-Zip: WELLINGTON, FL 33414

Title: MGR (X) Change () Addition
Name: RODRIGUEZ, GUSTAVO A SR.
Address: 1379 RIVERSIDE CIRCLE
City-St-Zip: WELLINGTON, FL 33414

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: GUSTAVO RODRIGUEZ

SR

01/16/2009

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