

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000033588

Entity Name: MIAMI INTERCHANGE LLC

FILED  
May 14, 2010  
Secretary of State

## Current Principal Place of Business:

2121 PONCE DE LEON BLVD  
650  
CORAL GABLES, FL 33134 US

## Current Mailing Address:

2121 PONCE DE LEON BLVD  
650  
CORAL GABLES, FL 33134 US

## New Principal Place of Business:

C/O RAM ACCOUNTING & TAX SERVICES, INC  
309  
MIAMI LAKES, FL 33015 US

## New Mailing Address:

C/O RAM ACCOUNTING & TAX SERVICES, INC  
17220 NW 64TH AVE., STE 309  
MIAMI LAKES, FL 33015 US

FEI Number: 27-2578157      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

MARCOVICI, NICOLAS  
2121 PONCE DE LEON BLVD  
650  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

MARCOVICI, NICOLAS A  
C/O RAM ACCOUNTING & TAX SERVICES, INC  
17220 NW 64TH AVE., STE 309  
MIAMI LAKES, FL 33015 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: NICOLAS MARCOVICI

05/14/2010

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM  
Name: MARCOVICI, NICOLAS  
Address: 17220 NW 64TH AVE., STE 309  
City-St-Zip: MIAMI LAKES, FL 33015 US

Title: MGR  
Name: MARCOVICI, MAZUCA  
Address: 17220 NW 64TH AVE., STE 309  
City-St-Zip: MIAMI LAKES, FL 33015 US

Title: MGR  
Name: MARCOVICI, ALAIN  
Address: 17220 NW 64TH AVE., STE 309  
City-St-Zip: MIAMI LAKES, FL 33015 US

Title: MGR  
Name: MARCOVICI, ANDREA  
Address: 17220 NW 64TH AVE., STE 309  
City-St-Zip: MIAMI LAKES, FL 33015 US

I hereby 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: NICOLAS A MARCOVICI

MGRM

05/14/2010

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