

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000039088

FILED  
Feb 21, 2009  
Secretary of State

Entity Name: BUGS 1 LLC

**Current Principal Place of Business:**

999 BRICKELL AVENUE, SUITE 401  
MIAMI, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 331717  
MIAMI, FL 33233

**New Mailing Address:**

FEI Number: 26-2463495

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

**Name and Address of New Registered Agent:**

GREER, DAVID  
999 BRICKELL AVE  
#401  
MIAMI, FL 33133 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: DAVID GREER

02/21/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: GREER, DAVID  
Address: 999 BRICKELL AVENUE, SUITE 401  
City-St-Zip: MIAMI, FL 33131

Title: MGR ( ) Delete  
Name: MCDONOUGH, ROBERT  
Address: 999 BRICKELL AVENUE, SUITE 401  
City-St-Zip: MIAMI, FL 33131

Title: S ( ) Delete  
Name: PERDOMO, LIZA  
Address: 999 BRICKELL AVENUE, SUITE 401  
City-St-Zip: MIAMI, FL 33131

Title: T ( ) Delete  
Name: MCDONOUGH, JUDITH  
Address: 999 BRICKELL AVENUE, SUITE 401  
City-St-Zip: MIAMI, FL 33131

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 GREER

MGR

02/21/2009

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