2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000045748

Entity Name: BIANCA COLETTI LLC

FILED Mar 31, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5 ISLAND AVE. STE 9B 4041 COLLINS AVENUE MIAMI BEACH, FL 33139

SUITE 1201

MIAMI BEACH, FL 33140

Current Mailing Address: New Mailing Address:

5 ISLAND AVE. STE 9B 4041 COLLINS AVENUE **SUITE 1201** MIAMI BEACH, FL 33139

MIAMI BEACH, FL 33140

FEI Number: 26-2579658 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GALEGO, NORA NCG MANAGEMENT LLC 232 ANDÁLUSIA AVE. #202 232 ANDALUSIA AVE. #202 US US CORAL GABLES, FL 33134 CORAL GABLES, FL 33134

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: N. GALEGO 03/31/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: () Delete (X) Change () Addition GOLDFARB, LAUREN GOLDFARB, LAUREN Name: Name:

Address: 5 ISLAND AVE. STE 9B Address: 4041 COLLINSA AVENUE #1201 City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: MIAMI BEACH, FL 33140

Title: MGRM () Delete Title: () Change () Addition

Name: COLETTI, BIANCA Name: Address: 27 SALAMONCA AVE. APT 6 Address: City-St-Zip: CORAL GABLES, FL 33134 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: B. COLETTI **MGRM** 03/31/2009