# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Apr 02, 2009**
**Secretary of State**

DOCUMENT# L08000060238

**Entity Name:** SEGABEACH, LLC

**Current Principal Place of Business:**

124 COLLINS AVENUE
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

**Current Mailing Address:**

1436 DREXELL AVE.
MIAMI BEACH, FL 33139

**New Mailing Address:**

**FEI Number: 26-2838827** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

CONSULTING SERVICES OF SOUTH FLORIDA, INC.
2121 PONCE DE LEON BLVD., STE. 1050
CORAL GABLE, FL 33134 US

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

CONSULTING SERVICES OF SOUTH FLORIDA, INC.
2121 PONCE DE LEON BLVD., STE. 1050
CORAL GABLES, FL 33134 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: 04/02/2009
Electronic Signature of Registered Agent — Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete
Name: JACOBO, SIMON
Address: 1436 DREXELL AVE.
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM ( ) Delete
Name: DIB, JAMIL
Address: 1436 DREXELL AVE.
City-St-Zip: MIAMI BEACH, FL 33139

Title: ( ) Delete
Name:
Address:
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition
Name: SEGAVENTURA, LLC,
Address: 2121 PONCE DE LEON BLVD. SUITE 1050
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM (X) Change ( ) Addition
Name: DIB, JAMIL F
Address: 1436 DREXELL AVE.
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM ( ) Change (X) Addition
Name: HURTADO, HECTOR
Address: 124 COLLINS AVE.
City-St-Zip: MIAMI BEACH, FL 33139

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: JAMIL F. DIB MGRM 04/02/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date