

**2012 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

**FILED  
Mar 08, 2012  
Secretary of State**

DOCUMENT# L11000133319

Entity Name: FOCUS ASSET MANAGEMENT, LLC

**Current Principal Place of Business:**

C/O H. PELOQUIN  
1811 NW 51ST STREET, SUITE 1036  
FT. LAUDERDALE, FL 33309

**New Principal Place of Business:**

**Current Mailing Address:**

C/O H. PELOQUIN  
1811 NW 51ST STREET, SUITE 1036  
FT. LAUDERDALE, FL 33309

**New Mailing Address:**

FEI Number: 99-0371173      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GRAZI, RYAN S  
217 E. OCEAN BLVD.  
STUART, FL 34994 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: METRONOMONE CAPITAL MANAGEMENT LTD  
Address: TOWN COURT #18,NASSAU ST. P.O.BOX CB-13582  
City-St-Zip: NASSAU, BAHAMAS, XX XXXXX XX

Title: MGRM  
Name: NEWMAN, JOEL A  
Address: 1401 SE PROCTOR LANE  
City-St-Zip: PORT ST LUCIE, FL 34983 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: JOEL A NEWMAN

MGRM

03/08/2012

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