

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L97000001080

FILED
Apr 29, 2009
Secretary of State

Entity Name: ACCENTMARKETING COMMUNICATIONS, L.C.

Current Principal Place of Business:

LA PUERTA DEL SOL
STE. 100, 800 DOUGLAS RD.
CORAL GABLES, FL 33134

New Principal Place of Business:

New Mailing Address:

LA PUERTA DEL SOL
STE. 100, 800 DOUGLAS RD.
CORAL GABLES, FL 33134

Current Mailing Address:

6401 SW 87 AVENUE, SUITE 204
MIAMI, FL 33173

FEI Number: 65-0785845

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: MGRM () Delete
Name: BLANCO, ESTEBAN
Address: LA PUERTA DEL SOL, STE. 100 800 DOUGLAS RD
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM () Delete
Name: BLANCO, MIRIAM
Address: LA PUERTA DEL SOL, STE. 100 800 DOUGLAS RD
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM () Delete
Name: BONET, FERNANDO
Address: LA PUERTA DEL SOL, STE. 100 800 DOUGLAS RD
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM () Delete
Name: THE INTERPUBLIC GROUP OF COMPANIES, INC.
Address: 1271 AVENUE OF THE AMERICAS, ROCKFELLER CE
City-St-Zip: NEW YORK, NY 10020

Title: MGRM () Delete
Name: NAPORANO, J
Address: CAMPBELL EWALD, 30400 VAN DYKE AVE
City-St-Zip: WARREN, MI 48093

Title: MGRM () Delete
Name: CAMERA, N
Address: 1271 AVENUE OF THE AMERICAS, ROCKFELLER CE
City-St-Zip: NEW YORK, NY 10020

ADDITIONS/CHANGES:

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

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

Title: MGRM (X) Change () Addition
Name: ROMERO, MARIA
Address: LA PUERTA DEL SOL, STE. 100 800 DOUGLAS RD
City-St-Zip: CORAL GABLES, FL 33134

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: MARIA ROMERO

MGRM

04/29/2009

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