2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000001204

200-3762 FOURTEENTH AVE

City-St-Zip: MARKHAM, ON L3R 0G7

Address:

Entity Name: SPA CAPITAL, LLC

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
3762 FOU 200	RTEENTH AV	ENUE		
	M, ON L3R 00	67		
Current Mailing Address:			New Mailing Address:	
3762 FOURTEENTH AVENUE 200				
	M, ON L3R 00	37		
FEI Number	: 52-2331282	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	l Address of (Current Registered Agent:	Name and Address	of New Registered Agent:
2731 EXE	VICES, INC. CUTIVE PARK , FL 33331	(DRIVE, STE. 4 US		
	named entity e of Florida.	submits this statement for the p	ourpose of changing its register	ed office or registered agent, or both
SIGNATUI	RE:			
	Electro	nic Signature of Registered Ag	ent	Date
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	LUBORSKY, B	URTEENTH AVE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGR (GUBBAY, DAV 450 PARK AVE NEW YORK, N	3RD FLOOR	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGR (LADAK, ZUHEI 450 PARK AVE NEW YORK, N	E, 3RD FLOOR	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name:	MGRM (PREMIER SAL) Delete ONS,, INC	Title: Name:	() Change () Addition

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.

Address:

City-St-Zip:

SIGNATURE: ROSLYN SAMTLEBEN SRVP 04/30/2008