


2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT

FILED
May 04, 2006 08:00 A
Secretary of State

DOCUMENT # M03000002746		
1. Entity Name MARCA HISPANIC LLC		
Principal Place of Business 1320 SOUTH DIXIE HIGHWAY STE 385 MIAMI, FL 33146	Mailing Address C/O MARC USA, INC. 225 W STATION SQ DR STE 500 PITTSBURGH, PA 15219	



04252006 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0135728	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent UNITED CORPORATE SERVICES, INC. 9200 SOUTH DADELAND BLVD., STE. 508 MIAMI, FL 33156	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$50.00
Due by May 1, 2006

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR BUCCI, ANTHONY 225 W. STATION SQUARE DRIVE, SUITE 500 PITTSBURGH, PA 15219
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR ZOLOT, STUART M 225 W. STATION SQUARE DRIVE, SUITE 500 PITTSBURGH, PA 15219
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR NIEVES, ANTHONY 1320 SOUTH DIXIE HIGHWAY CORAL GABLES, FL 33146
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR HERNANDEZ, ARMANDO J 1320 SOUTH DIXIE HIGHWAY CORAL GABLES, FL 33146
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR BEARD, GENE 225 W. STATION SQUARE DRIVE, SUITE 500 PITTSBURGH, PA 15219
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

U00000563200
05/20/06-80001-017 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  **STUART M. ZOLOT**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE
Date **4-25-06** Daytime Phone # **562-2000**