2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000002746

Entity Name: MARCA HISPANIC LLC

BEARD, GENE

PITTSBURGH, PA 15219

225 W. STATION SQUARE DRIVE, SUITE 500

Name:

Address:

City-St-Zip:

FILED Mar 23, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3390 MARY STREET STE 254 COCONUT GROVE, FL 33133 **New Mailing Address: Current Mailing Address:** C/O MARC USA, INC 225 W STATION SQ DR STE 500 PITTSBURGH, PA 15219 FEI Number: 20-0135728 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: UNITED CORPORATE SERVICES, INC 9200 SOUTH DADELAND BLVD., STE. 508 MIAMI, FL 33156 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete BUCCI, ANTHONY Name: Name: 225 W. STATION SQUARE DRIVE, SUITE 500 Address: Address: City-St-Zip: PITTSBURGH, PA 15219 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: ZOLOT, STUART M Name: Address: 225 W. STATION SQUARE DRIVE, SUITE 500 Address: City-St-Zip: PITTSBURGH, PA 15219 City-St-Zip: Title: MGR () Delete Title: () Change () Addition NIEVES, ANTHONY Name: Name: 3390 MARY STREET, SUITE 254 Address: Address: City-St-Zip: COCONUT GROVE, FL 33133 City-St-Zip: () Delete Title: MGR Title: () Change () Addition HERNANDEZ, ARMANDO J Name: Name: 3390 MARY STREET, SUITE 254 Address: Address: City-St-Zip: COCONUT GROVE, FL 33133 City-St-Zip: Title: MGR () Delete Title: () 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.

Name:

Address:

City-St-Zip:

SIGNATURE: STUART M. ZOLOT CFO 03/23/2009