

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000001813

Entity Name: Q CAPITAL STRATEGIES, LLC

FILED
Jan 07, 2009
Secretary of State

Current Principal Place of Business:

950 THIRD AVE, STE 2301
NEW YORK, NY 10022

New Principal Place of Business:

950 THIRD AVE
STE 2301
NEW YORK, NY 10022

Current Mailing Address:

950 THIRD AVE, STE 2301
NEW YORK, NY 10022

New Mailing Address:

950 THIRD AVE
STE 2301
NEW YORK, NY 10022

FEI Number: 45-0524146

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: CEOP () Delete
Name: SHAPIRO, STEVE
Address: 950 THIRD AVE, STE 2301
City-St-Zip: NEW YORK, NY 10022

Title: C () Delete
Name: SHAPIRO, PAUL
Address: 950 THIRD AVE, STE 2301
City-St-Zip: NEW YORK, NY 10022

Title: V () Delete
Name: FIELDMAN, HOWARD
Address: 5901 BROKEN SOUND PKWY NW, STE 200
City-St-Zip: BOCA RATON, FL 33487

Title: V () Delete
Name: MCCAROLL, JOHN
Address: 950 THIRD AVE, STE 2301
City-St-Zip: NEW YORK, NY 10022

ADDITIONS/CHANGES:

Title: CEOP (X) Change () Addition
Name: SHAPIRO, STEVEN
Address: 950 THIRD AVE, STE 2301
City-St-Zip: NEW YORK, NY 10022

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: STEVEN SHAPIRO

CEOP

01/07/2009

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