2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 21, 2009
Secretary of State

DOCUMENT# M04000004179

Entity Name: CT INTERNATIONAL HOLDINGS LLC

Current Principal Place of Business:

9100 S. DADELAND BOULEVARD, SUITE 1011
MIAMI, FL 33156

New Principal Place of Business:

Current Mailing Address:

9100 S. DADELAND BOULEVARD, SUITE 1011
MIAMI, FL 33156

New Mailing Address:

FEI Number: 16-1617141 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LABAN, GERALD M
9100 S. DADELAND BLVD., SUITE 1011
MIAMI, FL 33156 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: MGR ( ) Delete
Name: ARUN K. PURI LIVING TRUST 7/21/1988
Address: 9100 S. DADELAND BOULEVARD, SUITE 1011
City-St-Zip: MIAMI, FL 33156

Title: PRES ( ) Delete
Name: PURI, ARUN K MR.
Address: 341 LEUCADENDRA DRIVE
City-St-Zip: MIAMI, FL 33156 US

Title: V.P. ( ) Delete
Name: LABAN, GERALD M MR.
Address: 10883 SW 78TH AVE
City-St-Zip: MIAMI, FL 33156 US

ADDITIONS/CHANGES:

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: GERALD M LABAN VP 04/21/2009

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