

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000004882

FILED
Apr 20, 2009
Secretary of State

Entity Name: KUBANEY ACQUISITION, LLC

Current Principal Place of Business:

5757 BLUE LAGOON DRIVE, SUITE 230
MIAMI, FL 331262035

New Principal Place of Business:

Current Mailing Address:

5757 BLUE LAGOON DRIVE, SUITE 230
MIAMI, FL 331262035

New Mailing Address:

5757 BLUE LAGOON DRIVE
SUITE 230
MIAMI, FL 331262035

FEI Number: 20-4133517

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VAZQUEZ, LUIS JOEL
5757 BLUE LAGOON DRIVE, SUITE 230
MIAMI, FL 331262035 US

Name and Address of New Registered Agent:

VAZQUEZ, LUIS JOEL
5757 BLUE LAGOON DRIVE
SUITE 230
MIAMI, FL 331262035 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:

04/20/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: CEO () Delete
Name: BREIL, GIORA
Address: 5757 BLUE LAGOON DRIVE, SUITE 230
City-St-Zip: MIAMI, FL 331262035

Title: D () Delete
Name: HARLOW, ANTHONY
Address: 5757 BLUE LAGOON DRIVE, SUITE 230
City-St-Zip: MIAMI, FL 331262035

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: BRENNER, ANDREW
Address: 1585 BROADWAY
City-St-Zip: NEW YORK, NY 10036

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: GIORA BREIL

CEO

04/20/2009

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