## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000118866

Title:

Name:

Address:

City-St-Zip:

Entity Name: LEVERAGED LOAN TRADING HOLDINGS INC

FILED Sep 18, 2009 Secretary of State

•						
Current Principal Place of Business:			New Prince	New Principal Place of Business:		
1111 BRICKELL AVENUE MIAMI, FL 33131			46TH FLO	1271 AVENUE OF THE AMERICAS 46TH FLOOR NEW YORK, NY 10020		
Current Mailing Address:			New Maili	New Mailing Address:		
1111 BRKCKELL AVENUE MIAMI, FL 33131			1271 AVENUE OF THE AMERICAS 46TH FLOOR NEW YORK, NY 10020			
FEI Number	: 26-1340212	FEI Number Applied For ( )	FEI Number Not App	licable ( ) Certificate of Status Desired	I ( )	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
1201 HAY TALLAHA	ATION SERVIC S STREET SSEE, FL 323	012525 US				
	e named entity : e of Florida.	submits this statement for the	purpose of changing	its registered office or registered agent, o	or both,	
SIGNATU		sia Ciamatura of Domistored Am	ant	Dete		
Election Ca		nic Signature of Registered Ag g Trust Fund Contribution().	eni	Date		
OFFICER	S AND DIREC	TORS:	ADDITION	IS/CHANGES TO OFFICERS AND DIR	ECTOR	
Title: Name: Address: City-St-Zip:	FOURQUET, JO 1111 BRICKEL	L AVENUE	Title: Name: Address: City-St-Zip:	DCEO (X) Change ( ) Addition MARSAL, BRYAN 1271 AVENUE OF THE AMERICAS, 46TH FLO NEW YORK, NY 10020	OR	
Title: Name: Address: City-St-Zip:	BACHMAN, GA 745 SEVENTH	AVE 6TH FLOOR	Title: Name: Address: City-St-Zip:	VPAT (X) Change ( ) Addition KLANG, LINDA 1271 AVENUE OF THE AMERICAS, 46TH FLO NEW YORK, NY 10020	OR	
Title: Name: Address:	DS ( ) WONG, JENNY	) Delete	Title: Name:	VPAT (X) Change ( ) Addition CIONGOLI, JEFFRY		

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: LINDA KLANG VPAT 09/18/2009

(X) Delete

CSC- 2711 CENTERVILLE RD, SUITE 400

ROSSER, MARK

WILMINGTON, DE 19808

() Change () Addition