

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# Z00512

FILED
Jan 14, 2009
Secretary of State

Entity Name: METEC ASSET MANAGEMENT, L.C.

Current Principal Place of Business:

2100 CORAL WAY, SUITE 300
MIAMI, FL 33145

New Principal Place of Business:

2600 DOUGLAS ROAD
SUITE 800
CORAL GABLES, FL 33134

Current Mailing Address:

2100 CORAL WAY, SUITE 300
MIAMI, FL 33145

New Mailing Address:

2600 DOUGLAS ROAD
SUITE 800
CORAL GABLES, FL 33134

FEI Number: 65-0349585

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MILLER, ROBERT R
2100 CORAL WAY, #300
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

MILLER, ROBERT R
2600 DOUGLAS ROAD
SUITE 800
CORAL GABLES, FL 33134 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:

01/14/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: HERNANDEZ, RICHARD
Address: 5906 MAIDEN LANE
City-St-Zip: BETHESDA, MD 20817

Title: MGR () Delete
Name: TORANO, ERIC J
Address: 2100 CORAL WAY, SUITE 300
City-St-Zip: MIAMI, FL 33145

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: TORANO, ERIC J
Address: 2600 DOUGLAS ROAD, SUITE 800
City-St-Zip: CORAL GABLES, FL 33134

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: ERIC J. TORANO

MGR

01/14/2009

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