

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000003190

FILED
Jan 15, 2009
Secretary of State

Entity Name: DIRECT PLUS, LLC

Current Principal Place of Business:

800 S DOUGLAS ROAD, 11TH FLOOR
CORAL GABLES, FL 33134

New Principal Place of Business:

806 S DOUGLAS ROAD, 9TH FLOOR
CORAL GABLES, FL 33134

Current Mailing Address:

806 S DOUGLAS ROAD, 9TH FLOOR
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 06-1765574

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MENENDEZ, FRANCISCO J
2200 MUSEUM TOWER, 150 WEST FLAGLER STREET
MIAMI, FL 33130 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: P () Delete
Name: BELLO, ANTONIO
Address: 521 SAN ANTONIO AVE
City-St-Zip: CORAL GABLES, FL 33146

Title: ST () Delete
Name: PEREZ, ALBERTO
Address: 323 MALAGA AVE
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

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: ANTHONY BELLO

P

01/15/2009

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