2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 04, 2005
Secretary of State

DOCUMENT# L00000002363

Entity Name: NIPES, L.L.C.

Current Principal Place of Business:

18851 NW 29TH AVE
900
AVENTURA, FL 33180

New Principal Place of Business:

Current Mailing Address:

18851 NW 29TH AVE
900
AVENTURA, FL 33180

New Mailing Address:

FEI Number: 20-1333620 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

RUSSO, MARK E ESQ
18851 NE 29TH AVE #900
AVENTURA, FL 33180 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/MEMBERS:

Title:	MGRM ( ) Delete	
Name:	GAGGINO, PABLO A	
Address:	FANSTINO ALLENDE 866	
City-St-Zip:	CIUDAD DE CDRDOBA, ARGENTINA,	X5004DIR
Title:	MGRM ( ) Delete	
Name:	GELFO, ATILIO A	
Address:	FANSTINO ALLENDE 866	
City-St-Zip:	CIUDAD DE CDRDOBA, ARGENTINA,	X5004DIR
Title:	MGRM ( ) Delete	
Name:	IRAZUETA, ROMAN	
Address:	FANSTINO ALLENDE 866	
City-St-Zip:	CIUDAD DE CDRDOBA, ARGENTINA,	X5004DIR
Title:	MGRM ( ) Delete	
Name:	SANCHEZ, HUGO M	
Address:	FANSTINO ALLENDE 866	
City-St-Zip:	CIUDAD DE CDRDOBA, ARGENTINA,	X5004DIR

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PABLO GAGGINO MGRM 05/04/2005

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