

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000010700

Entity Name: WIRES@WORK, L.L.C.

FILED  
Apr 21, 2008  
Secretary of State

**Current Principal Place of Business:**

100 ALMERIA AVENUE, SUITE 230  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 143509  
SUITE 902  
MIAMI, FL 33114

**New Mailing Address:**

2616 GRANADA BLVD.  
CORAL GABLES, FL 33134

FEI Number: 65-1049022

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BOHATCH, JOHN S ESQ.  
2600 DOUGLAS ROAD, PENTHOUSE 8  
CORAL GABLES, FL 33134 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: MGR ( ) Delete  
Name: PIETRA, MANUEL S  
Address: 100 ALMERIA AVENUE, SUITE 230  
City-St-Zip: CORAL GABLES, FL 33134

**ADDITIONS/CHANGES:**

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: MANUEL SCHIAPPA PIETRA

MGR

04/21/2008

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