

**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Jun 01, 2006  
Secretary of State**

DOCUMENT# L01000005483

Entity Name: FABLEX ENTERPRISES LLC

**Current Principal Place of Business:**

15787 S.W. 77 ST.  
MIAMI, FL 33193

**New Principal Place of Business:**

**Current Mailing Address:**

15787 S.W. 77 ST.  
MIAMI, FL 33193

**New Mailing Address:**

FEI Number: 65-1131252      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

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

LUIS VILLA, FRANCISCO  
15787 S.W. 77 ST.  
MIAMI, FL 33193    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: \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGR      ( ) Delete  
Name: ANTONIO MESA,  
Address: 4315 N.W.7ST  
City-St-Zip: MIAMI, FL 33126

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

Title: MGR      ( ) Delete  
Name: PIEDAD VILLA ROJAS,  
Address: 15787 S.W. 77 ST.  
City-St-Zip: MIAMI, FL 33193

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 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: FRANCISCO LUIS VILLA

MGRM

06/01/2006

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