

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000025716

FILED  
Apr 28, 2006  
Secretary of State

Entity Name: PORTUS, L.L.C.

**Current Principal Place of Business:**

520 BRICKELL KEY DRIVE, SUITE O-305  
MIAMI, FL 33131

**New Principal Place of Business:**

1100 BRICKELL AVENUE, SUITE 310  
MIAMI, FL 33131

**Current Mailing Address:**

520 BRICKELL KEY DRIVE, SUITE O-305  
MIAMI, FL 33131

**New Mailing Address:**

1100 BRICKELL AVENUE, SUITE 310  
MIAMI, FL 33131

FEI Number: 20-1678066

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TRANSGLOBAL CORPORATE ADMINISTRATION, LLC.  
520 BRICKELL KEY DRIVE  
SUITE O-305  
MIAMI, FL 33131 US

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

NS CORPORATE SERVICES INC.  
1100 BRICKELL AVENUE, SUITE 310  
MIAMI, FL 33131 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: NS CORPORATE SERVICES INC.

04/28/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: GOMES PEREIRA, JOAO  
Address: 520 BRICKELL KEY DRIVE, SUITE O-305  
City-St-Zip: MIAMI, FL 33131

Title: MGR ( ) Delete  
Name: GOMES FONTES, JAIR  
Address: 520 BRICKELL KEY DRIVE, SUITE O-305  
City-St-Zip: MIAMI, FL 33131

Title: AS (X) Delete  
Name: STANHAN, NICHOLAS  
Address: 520 BRICKELL KEY DRIVE SUITE O-305  
City-St-Zip: MIAMI, FL 33131

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: GOMES PEREIRA, JOAO  
Address: 1100 BRICKELL AVENUE, SUITE 310  
City-St-Zip: MIAMI, FL 33131

Title: MGR (X) Change ( ) Addition  
Name: GOMES FONTES, JAIR  
Address: 1100 BRICKELL AVENUE, SUITE 310  
City-St-Zip: MIAMI, FL 33131

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: JOAO GOMES

MGR

04/28/2006

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