
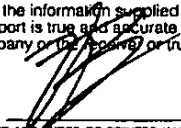


**2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**May 23, 2005 8:00 am**  
**Secretary of State**

04-29-2005 90056 044 \*\*\*\*50.00

DOCUMENT # L04000090742			
1. Entity Name NEW JOYITA, LLC			
Principal Place of Business 1441 BRICKELL AVENUE SUITE 1014 MIAMI, FL 33131		Mailing Address 1441 BRICKELL AVENUE SUITE 1014 MIAMI, FL 33131	
2. Principal Place of Business 1441 BRICKELL AVE		3. Mailing Address 1441 BRICKELL AVE	
Suite, Apt. #, etc. 1400		Suite, Apt. #, etc. 1400	
City & State MIAMI, FL		City & State MIAMI, FL	
Zip 33131	Country USA	Zip 33131	Country USA
4. FEI Number 20-2176864		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent ROBERT ALLEN LAW 1441 BRICKELL AVENUE SUITE 1014 MIAMI, FL 33131		7. Name and Address of New Registered Agent Name ROBERT ALLEN LAW Street Address (P.O. Box Number is Not Acceptable) 1441 BRICKELL AVE SUITE 1400 City MIAMI FL Zip Code 33131	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) _____ DATE _____			
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR PERALTA, ERNESTO <input checked="" type="checkbox"/> Delete 1441 BRICKELL AVE, SUITE 1014 MIAMI, FL 33131	TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR Peralta, Ernesto <input type="checkbox"/> Change <input type="checkbox"/> Addition 1441 Brickell Avenue Ste 1400 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR PERALTA, VERONICA A <input checked="" type="checkbox"/> Delete 1441 BRICKELL AVE, SUITE 1014 MIAMI, FL 33131	TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR Peralta, Veronica <input type="checkbox"/> Change <input type="checkbox"/> Addition 1441 Brickell Avenue Ste 1400 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11. I hereby certify that the information supplied with this filing does not qualify 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 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 partner or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.			
SIGNATURE: 		Umberto Bonavita 4/27/05 (305) 372-3300	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date Daytime Phone #	