

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000000642

FILED  
Apr 27, 2007  
Secretary of State

Entity Name: WARTISPONK, LLC.

**Current Principal Place of Business:**

8360 WEST FLAGLER STREET  
SUITE 110  
MIAMI, FL 33144

**New Principal Place of Business:**

**Current Mailing Address:**

8360 WEST FLAGLER STREET  
SUITE 110  
MIAMI, FL 33144

**New Mailing Address:**

FEI Number: 43-2073088      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

MOLDES, MOISES M  
8360 WEST FLAGLER STREET, SUITE 110  
MIAMI, FL 33144      US

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

CARTOTTO, MARK  
8360 WEST FLAGLER STREET, SUITE 110  
MIAMI, FL 33144      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: MARK CARTOTTO

04/27/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: GUENECHEA, YON  
Address: 100 APACHE STREET  
City-St-Zip: MIAIM SPRINGS, FL 33166

Title: MGRM ( ) Delete  
Name: MOLDES, MOISES M  
Address: 100 APACHE STREET  
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: MGRM ( ) Delete  
Name: FORESTIER, CHRISTOPHE  
Address: 1300 SW 78 CT  
City-St-Zip: MIAMI, FL 33144

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: GUENECHEA, YON  
Address: 8360 W FLAGLER ST., SUITE 110  
City-St-Zip: MIAIM, FL 33144

Title: MGRM (X) Change ( ) Addition  
Name: MOLDES, MOISES M  
Address: 8360 W FLAGLER ST. SUITE 110  
City-St-Zip: MIAMI, FL 33144

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: MOISES M MOLDES

MGRM

04/27/2007

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