## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000097281

Entity Name: GRUPO CITY, LLC

FILED Feb 12, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 5654 NW 79TH AVE DORAL, FL 33166 **Current Mailing Address: New Mailing Address:** 5654 NW 79TH AVE DORAL, FL 33166 FEI Number: 20-3612892 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TALIESON ADVISORY, CORP. 9655 SOUTH DIXIE HIGHWAY, SUITE 101 MIAMI, FL 33156 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: ( ) Delete Title: () Change () Addition CALAROTA, SEBASTIAN Name: Name: Address: 8160 GENEVA CT, A-109 Address: City-St-Zip: MIAMI, FL 33166 City-St-Zip: Title: Title: MEMB ( ) Change (X) Addition ( ) Delete Name: Name: GIGLIO, ROLANDO Address: Address: 5654 NW 79 AVENUE City-St-Zip: City-St-Zip: DORAL, FL 33166 Title: () Delete Title: MEMB ( ) Change (X) Addition GIGLIO, ANGELA Name: Name: 5654 NW 79 AVENUE Address: Address: City-St-Zip: City-St-Zip: DORAL, FL 33166 Title: () Delete Title: MEMB ( ) Change (X) Addition Name: Name: CITY, COURIER SRL 5654 NW 79 AVENUE Address: Address: City-St-Zip: City-St-Zip: DORAL, FL 33166

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: SEBASTIAN CALAROTA MGR 02/12/2008