

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000029819

FILED  
Apr 14, 2008  
Secretary of State

**Entity Name:** THE RIDE EXPERIENCE, LLC

**Current Principal Place of Business:**

1250 SOUTH MIAMI AVE.  
SUITE 1408  
MIAMI, FL 33130

**New Principal Place of Business:**

**Current Mailing Address:**

1250 SOUTH MIAMI AVE. SUITE 1408  
MIAMI, FL 33130

**New Mailing Address:**

1250 SOUTH MIAMI AVE.  
SUITE 1408  
MIAMI, FL 33130

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

MALDONADO, JOSE ANTONIO  
1250 SOUTH MIAMI AVE. SUITE 1408  
MIAMI, FL 33130 US

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

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:**

Title: MGRM ( ) Delete  
Name: MALDONADO, JOSE ANTONIO  
Address: 1250 SOUTH MIAMI AVE. SUITE 1408  
City-St-Zip: MIAMI, FL 33130

**ADDITIONS/CHANGES:**

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: JOSE ANTONIO MALDONADO

MGRM

04/14/2008

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