

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED  
May 01, 2007  
Secretary of State

DOCUMENT# L06000094706

Entity Name: OTALVARO GROUP, LLC

**Current Principal Place of Business:**

ATTN: CARLOS JUAN OTALVARO  
7244 S.W. 42ND TERRACE, UNIT #5  
MIAMI, FL 33155

**New Principal Place of Business:**

**Current Mailing Address:**

ATTN: CARLOS JUAN OTALVARO  
7244 S.W. 42ND TERRACE, UNIT #5  
MIAMI, FL 33155

**New Mailing Address:**

FEI Number:  FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

KRINZMAN, ALAN E ESQ.  
121 ALHAMBRA PLAZA, SUITE 1000  
CORAL GABLES, FL 33134 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: MGR  Delete  
Name: OTALVARO, CARLOS J  
Address: 7244 S.W. 42ND TERRACE, UNIT #5  
City-St-Zip: MIAMI, FL 33155

Title: MGR  Delete  
Name: OTALVARO, NOAH  
Address: 9468 PEACEFUL DRIVE  
City-St-Zip: SANIBEL, FL 33957

**ADDITIONS/CHANGES:**

Title:  Change  Addition  
Name:  
Address:  
City-St-Zip:

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: NOAH OTALVARO

MGR

05/01/2007

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