

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000083869

FILED
Apr 30, 2009
Secretary of State

Entity Name: NOVAES ENTERPRISES, LLC

Current Principal Place of Business:

801 BRICKELL BAY DR.
BOX 16
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

520 BRICKELL KEY DRIVE
SUITE O-305
MIAMI, FL 33131 US

New Mailing Address:

520 BRICKELL KEY DRIVE
SUITE O-301
MIAMI, FL 33131 US

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DYMAX INTERNATIONAL SERVICES, INC.
520 BRICKELL KEY DRIVE
SUITE O-305
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

DYMAX INTERNATIONAL SERVICES, INC.
520 BRICKELL KEY DRIVE
SUITE O-301
MIAMI, FL 33131 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:

04/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: NOVAES, JORGE F
Address: AV. DAS AMERICAS, 4200 - BLOCO 9 - 219/219
City-St-Zip: RIO DE JANEIRO, RJ 21940-190 BR

Title: MGR () Delete
Name: NOVAES, CAMILA A
Address: AV. DAS AMERICAS, 4200 - BLOCO 9 - 219/219
City-St-Zip: RIO DE JANEIRO, RJ 21940-190 BR

Title: MGR () Delete
Name: NOVAES, RAPHAEL A
Address: AV. DAS AMERICAS, 4200 - BLOCO 9 - 219/219
City-St-Zip: RIO DE JANEIRO, RJ 21940-190 BR

ADDITIONS/CHANGES:

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

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: JORGE F. NOVAES

MGRM

04/30/2009

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