

01/17/2007 14:06

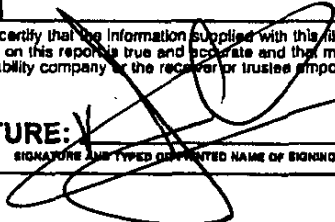
Accounting

(FAX) 3057574465

P. 003/006

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 23, 2007 08:00 AM
Secretary of State

DOCUMENT # M01000001534			
1. Entity Name VISIONARIA CAPITAL PARTNERS LLC			
Principal Place of Business 20801 BISCAYNE BLVD., SUITE 403 AVENTURA, FL 33180		Mailing Address 13040 S.W. 56TH TERRACE MIAMI, FL 33183	
DO NOT WRITE IN THIS SPACE		01172007 No Chg-LLC CR2E083 (11/05)	
		4. FEI Number 65-1060847 Applied For Not Applicable 5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required	
2. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		DO NOT WRITE IN THIS SPACE	
6. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)			
Filing Fee is \$80.00 Due by May 1, 2007			
9. MANAGING MEMBERS/MANAGERS			
TITLE	MGRM	DO NOT WRITE IN THIS SPACE	
NAME	CAREAGA, JAVIER		
STREET ADDRESS	20801 BISCAYNE BLVD., SUITE 403		
CITY- ST- ZIP	AVENTURA, FL 33180		
TITLE	MGRM		
NAME	GARCIA-MOROS, BLAS		
STREET ADDRESS	20801 BISCAYNE BLVD., SUITE 403	DO NOT WRITE IN THIS SPACE	
CITY- ST- ZIP	AVENTURA, FL 33180		
TITLE	MGRM		
NAME	PERALES, ALONSO		
STREET ADDRESS	20801 BISCAYNE BLVD., SUITE 403		
CITY- ST- ZIP	AVENTURA, FL 33180		
TITLE		DO NOT WRITE IN THIS SPACE	
NAME			
STREET ADDRESS			
CITY- ST- ZIP			
TITLE			
NAME			
STREET ADDRESS		DO NOT WRITE IN THIS SPACE	
CITY- ST- ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY- ST- ZIP			
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 recorder or trustee empowered to execute this report as required by Chapter 806, Florida Statutes.			
SIGNATURE: 		1/17/07 305-932-1952 Date Daytime Phone #	