2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

Apr 15, 2004 8:00 am Secretary of State **DOCUMENT # L01000003371** 04-15-2004 90114 032 ****50.00 VIDREPUR OF AMERICA LLC Principal Place of Business Mailing Address **2818 NW 112TH AVENUE** 2818 NW 112TH AVENUE MIAMI, FL 33172 MIAMI, FL 33172 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04122004 Cha-LLC CR2E083 (10/03) City & State 4. FEI Number Applied For City & State 65-1079982 Not Applicable Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Alvaro Castillo B., P.A. LUIS, AGRAMUNT Street Address (P.O. Box Number is Not Acceptable) 1390 Brickell Avenue, 1221 BRICKELL AVE. Suite 200 **SUITE 1100** MIAMI, FL 33131 Zip Code 33131 8. 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 Signature, typed or printed name of registered agent and late if applicable 4-12-04 Filling Fee is \$50.00 Due by May 1, 2004 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. Addition TITLE **MGRM** TITLE MGRM ☐ Delete Change Vidrepur, S.A. NAME VIDREPUR, S.A. 2818 N.W. 112 Avenue 1221 BRICKELL AVE. STREET ADDRESS STREET ADDRESS Miami, FL 33172 CITY-ST-ZIP MIAMI, FL 33131 CITY-ST-ZIP MGRM X Delete Change ☐ Addition MARQUINA, JOSE NAME NAME 1221 BRICKELL AVE. STREET ADDRESS STREET ADDRESS CITY-ST-7IP MIAMI, FL 33131 CITY-ST-ZIP TITLE MGRM S.L. Change Addition ☐ Delete Glass Mosaic International, NAME 2818 N.W. 112 Avenue STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Miami, FL 33172 ☐ Delete TITLE TITLE Change X Addition P Jose Luis Santapau NAME NAME 2818 N.W. 112 Avenue STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Miami, FL 33172 TITLE ☐ Delete TITLE V/S ☐ Change X Addition Jose P. Ortells NAME NAME 2818 N.W. 112 Avenue STREET ADDRESS STREET ADDRESS Miami, FL 33172 CITY-ST-7IP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

RE: JOSE P. Ortallo, V. P. NATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

FILED