2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 07, 2005
Secretary of State

DOCUMENT# L03000012516

Entity Name: LIMI INVESTMENTS, LLC

Current Principal Place of Business:

801 BRICKELL BAY DRIVE
#1866
MIAMI, FL 33131

New Principal Place of Business:

2101 BRICKELL AVENUE
#2005
MIAMI, FL 33129

Current Mailing Address:

801 BRICKELL BAY DRIVE
#1866
MIAMI, FL 33131

New Mailing Address:

2101 BRICKELL AVENUE
#2005
MIAMI, FL 33129

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VOLPE, FRANCESCO
801 BRICKELL BAY DRIVE
#1866
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

VOLPE, FRANCESCO
2101 BRICKELL AVENUE
#2005
MIAMI, FL 33129 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: 01/07/2005
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete
Name: FRANCESCO, VOLPE
Address: 801 BRICKELL BAY DR #1866
City-St-Zip: MIAMI, FL 33131

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: FRANCESCO, VOLPE
Address: 2101 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33129

Title: MGR ( ) Change (X) Addition
Name: FRANCESCO, VOLPE
Address: 2101 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33129

I hereby certify that the information supplied with this filing does not qualify for the 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 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: FRANCESCO VOLPE MGR 01/07/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date