

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000017254

**FILED**  
**Feb 22, 2005**  
**Secretary of State**

**Entity Name:** AMIA, L.L.C.

**Current Principal Place of Business:**

CORONA COMMERCIAL PLAZA  
PROGRESO ST. #54  
SANTURCE, PR 00909

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 363148  
SAN JUAN, PR 009363148

**New Mailing Address:**

**FEI Number:** 65-1144925

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MJF RESIDENT AGENT CORP.  
153 SEVILLA AVENUE  
MIAMI, FL 331346006 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/MEMBERS:**

Title: VP ( ) Delete  
Name: MUNOZ, ANTONIO J  
Address: SIERRA ALTA, 15 - 1ST  
City-St-Zip: SAN JUAN, PR 00926

Title: MGRT ( ) Delete  
Name: MUNOZ, ARMANDO A  
Address: LA SIERRA DEL RIO, P-12, 4 ST.  
City-St-Zip: SAN JUAN, PR 00926

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: MUNOZ, ANTONIO J  
Address: SIERRA ALTA, 15 - 1ST  
City-St-Zip: SAN JUAN, PR 00926

Title: MGR (X) Change ( ) Addition  
Name: MUNOZ, ARMANDO A  
Address: LA SIERRA DEL RIO, P-12, 4 ST.  
City-St-Zip: SAN JUAN, PR 00926

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: ANTONIO MUNOZ

MGRM

02/22/2005

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