

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000022755

FILED
Aug 31, 2007
Secretary of State

Entity Name: SINEQUANET ESTRATEGIA DIGITAL, L.L.C.

Current Principal Place of Business:

30 SW 8 ST
MIAMI, FL 33130

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 370833
MIAMI, FL 33137

New Mailing Address:

FEI Number: 14-1847300 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

AMEVISANET, LC
30 SW 8 ST
MIAMI, FL 33130 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/MANAGERS:

Title: MGRM () Delete
Name: BERMUDEZ, ESTHER
Address: PO BOX 370833
City-St-Zip: MIAMI, FL 33137

Title: MGRM () Delete
Name: GONZALEZ, LUIS M
Address: PO BOX 370833
City-St-Zip: MIAMI, FL 33137

Title: MGRM () Delete
Name: BERNAL, ANNIE
Address: PO BOX 370833
City-St-Zip: MIAMI, FL 33137

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: ESTHER BERMUDEZ

MGRM

08/31/2007

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