

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000117184

Entity Name: ESVI INVESTMENTS LLC

FILED
Feb 07, 2008
Secretary of State

Current Principal Place of Business:

283 CATALONIA AVENUE, 2ND FLOOR
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

283 CATALONIA AVENUE, 2ND FLOOR
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 20-3904686

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIAMI CORPORATE SYSTEMS, INC.
283 CATALONIA AVENUE, 2ND FLOOR
CORAL GABLES, FL 33134 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: MGR () Delete
Name: VIGIL, JORGE M
Address: 283 CATALONIA AVENUE, 2ND FLOOR
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR () Delete
Name: ESQUENAZI, SALOMON B
Address: 283 CATALONIA AVENUE, 2ND FLOOR
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR () Delete
Name: ESQUENAZI, MARCOS B
Address: 283 CATALONIA AVENUE, 2ND FLOOR
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR () Delete
Name: ESQUENAZI, ALBERTO B
Address: 283 CATALONIA AVENUE, 2ND FLOOR
City-St-Zip: CORAL GABLES, FL 33134

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:

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: SALOMON B. ESQUENAZI

MGR

02/07/2008

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