

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000005890

FILED
Jul 15, 2008
Secretary of State

Entity Name: SECCION AMARILLA USA, LLC

Current Principal Place of Business:

3350 SW 148 AVE.
SUITE 410
MIRAMAR, FL 33027

New Principal Place of Business:

Current Mailing Address:

3350 SW 148 AVE
SUITE 410
MIRAMAR, FL 33027

New Mailing Address:

3350 SW 148 AVE.
SUITE 410
MIRAMAR, FL 33027

FEI Number: 56-2429025 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:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: SCHWAYCOR, BENJAMIN PODOS
Address: 3350 SW 148 AVE. SUITE 410
City-St-Zip: MIRAMAR, FL 33027

Title: MGR () Delete
Name: RODRIGUEZ, JORGE
Address: 3350 SW 148 AVE. SUITE 410
City-St-Zip: MIRAMAR, FL 33027

Title: MGR () Delete
Name: SALVATORI, JOSE LUIS
Address: 3350 SW 148 AVE. SUITE 410
City-St-Zip: MIRAMAR, FL 33027

Title: MGR () Delete
Name: MARHAN, ALEXANDER
Address: 3350 SW 148 AVE. SUITE 410
City-St-Zip: MIRAMAR, FL 33027

Title: MGR () Delete
Name: BLUE, JONATHAN S
Address: 333 EAST MAIN STREET SUITE 200
City-St-Zip: LOUISVILLE, KY 40202

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:

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: ALEXANDER MARHAN

MGR

07/15/2008

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