

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000003013

Entity Name: PALKEEPERS USA, L.L.C.

FILED
Apr 27, 2005
Secretary of State

Current Principal Place of Business:

8120 NW 66 ST.
MIAMI, FL 33166

New Principal Place of Business:

Current Mailing Address:

8120 NW 66 ST.
MIAMI, FL 33166

New Mailing Address:

3399 NW 72ND AVE
SUITE 209A
MIAMI, FL 33122

FEI Number: 65-0991125

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUEVAS, ANDREW ESQ
536 BILTMORE WAY
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/MEMBERS:

Title: MGR () Delete
Name: ALVAREZ, GONZALO PULIDO
Address: 8120 NW 66 ST.
City-St-Zip: MIAMI, FL 33166

Title: MGR () Delete
Name: PULIDO ZORRO, ADRIANA MARIA
Address: 8120 NW 66 ST.
City-St-Zip: MIAMI, FL 33166

Title: MGR () Delete
Name: PULIDO, JORGE
Address: 8120 NW 66TH ST
City-St-Zip: MIAMI, FL 33166

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ALVAREZ, GONZALO PULIDO
Address: 8120 NW 66 ST.
City-St-Zip: MIAMI, FL 33166

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 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: GONZALO PULIDO

MGRM

04/27/2005

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