

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000004962

FILED  
Jun 29, 2006  
Secretary of State

Entity Name: INVEST IMPEX LLC

**Current Principal Place of Business:**

1220 N. MARKET ST., STE. 808  
WILMINGTON, DE 19801

**New Principal Place of Business:**

**Current Mailing Address:**

1220 N. MARKET ST., STE. 808  
WILMINGTON, DE 19801

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) 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:**

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

FLORIDA FILING & SEARCH SERVICES, INC.  
1333 N. DUVAL ST.  
TALLAHASSEE, FL 32303 US

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: MM ( ) Delete  
Name: WORLD FUND, INC.,  
Address: STE 302, E BLDG NO34/20, CUBA AVE & 34TH  
City-St-Zip: PANAMA CITY 5 PANAMA,

Title: MM ( ) Delete  
Name: EURO-AMEX EXCHANGE,, INC.  
Address: STE 302, E BLDG NO34/20, CUBA AVE & 34TH  
City-St-Zip: PANAMA CITY 5 PANAMA,

**ADDITIONS/CHANGES:**

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 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: SID GARNETT - AUTHORIZED PERSON

MM

06/29/2006

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