2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 20, 2006 08:00 AM
Secretary of State

DOCUMENT # L00000005461

1. Entity Name
VISTA HERMOSA VENTURES LLC

Principal Place of Business
C/O MARGULIES AND RONES PA
16105 NE 18 AVENUE
NORTH MIAMI BEACH, FL 33162

Mailing Address
C/O MARGULIES AND RONES PA
16105 NE 18 AVENUE
NORTH MIAMI BEACH, FL 33162

01102006No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1094731 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

RONES, VICTOR K ESQ
C/O MARGULIES AND RONES PA
16105 NE 18 AVENUE
NORTH MIAMI BEACH, FL 33162

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee Is $50.00
Due by May 1, 2006

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	WOLDENBERG, ROBERTO S
STREET ADDRESS	325 WEST 86TH ST APT. 9B
CITY-ST-ZIP	NEW YORK, NY 10024
TITLE	MGR
NAME	WOLDENBERG, JORGE
STREET ADDRESS	20803 BISCAYNE BLVD., STE. 204
CITY-ST-ZIP	AVENTURA, FL 33180
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/04/06-80011-023 150.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

Tel. (212) 317-1564

SIGNATURE: X Roberto S. Woldenberg, Manager, 2/13/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #