

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000012265

FILED
May 04, 2006
Secretary of State

Entity Name: FERRO INVESTMENT GROUP LLC

Current Principal Place of Business:

8165 NW 155 ST
MIAMI LAKES, FL 33016

New Principal Place of Business:

Current Mailing Address:

8165 NW 155 ST
MIAMI LAKES, FL 33016

New Mailing Address:

FEI Number: 65-1053034 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:

FERRO, MARIO JR.
9921 W. OKEECHOBEE ROAD, SUITE 126A
HIALEAH, FL 33016 US

Name and Address of New Registered Agent:

FERRO, MARIO JR.
8165 N.W. 155 STREET
MIAMI LAKES, FL 33016 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:

05/04/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: FERRO, MARIO JR.
Address: 8165 NW 155 ST.
City-St-Zip: MIAMI LAKES, FL 33014

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: FERRO, MARIO JR.
Address: 8165 NW 155 ST.
City-St-Zip: MIAMI LAKES, FL 33016

Title: D () Change (X) Addition
Name: FERRO, RIS
Address: 8165 NW 155 STREET
City-St-Zip: MIAMI LAKES, FL 33016

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: MARIO FERRO

P

05/04/2006

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