

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000013544

Entity Name: VUC, LLC

FILED
May 03, 2005
Secretary of State

Current Principal Place of Business:

1790 CORAL WAY
202
MIAMI, FL 33145

New Principal Place of Business:

Current Mailing Address:

1790 CORAL WAY
202
MIAMI, FL 33145

New Mailing Address:

FEI Number: 52-2291213 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:

LINARES, JUAN M
1790 CORAL WAY
202
MIAMI, FL 33145 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: MGRM () Delete
Name: FUNDACION UNIVERSITA, RIA LOS LIBERT A DORES
Address: 1790 CORAL WAY (202)
City-St-Zip: MIAMI, FL 33145

Title: MGRM () Delete
Name: INPAHU,
Address: 1790 CORAL WAY (202)
City-St-Zip: MIAMI, FL 33145

Title: MGRM () Delete
Name: FUNDACION AREA ANDIN, A
Address: 1790 CORAL WAY (202)
City-St-Zip: MIAMI, FL 33145

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:

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: JUAN M. LINARES

M

05/03/2005

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