

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000015393

Entity Name: SOCRAB, L.L.C.

FILED
Aug 25, 2006
Secretary of State

Current Principal Place of Business:

1514 WINTERBERRY 2ND
WESTON, FL 33327

New Principal Place of Business:

10 ARAGON AVE
919
CORAL GABLE, FL 33134

Current Mailing Address:

1514 WINTERBERRY 2ND
WESTON, FL 33327

New Mailing Address:

10 ARAGON AVE
APT 919
CORAL GABLES, FL 33134

FEI Number: 65-1061877 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:

CUEVAS, ANDREW ESQ.
536 BILTMORE WAY
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

PASTRAN, ADOLFO
10 ARAGON AVE
APT 919
CORAL GABLES, FL 33134 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: ADOLFO PASTRAN

08/25/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PASTRAN, ADOLFO
Address: 536 BILTMORE WAY
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR () Delete
Name: CEJAS, EMILIANA
Address: 536 BILTMORE WAY
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PASTRAN, ADOLFO
Address: 10 ARAGON AVE APT 919
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR (X) Change () Addition
Name: CEJAS, EMILIANA
Address: 10 ARAGON AVE APT 919
City-St-Zip: CORAL GABLES, FL 33134

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: ADOLFO PASTRAN

MGR

08/25/2006

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