

FILED
Jan 18, 2008 8:00 am
Secretary of State

01-18-2008 90017 007 ***138.75

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L01000004202		
1. Entity Name ISABELLA USA, LLC		
Principal Place of Business 201 SOUTH BISCAYNE BLVD. SUITE 850 MIAMI, FL 33131	Mailing Address 201 SOUTH BISCAYNE BLVD. SUITE 850 MIAMI, FL 33131	60002320
DO NOT WRITE IN THIS SPACE		
		01082008 No Chg-LLC CR2E083 (12/07)
		4. FEI Number 65-1086417
		Applied For ☐ Not Applicable
		5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required
6. Name and Address of Current Registered Agent		
ROSSZ FIU COPORATION 201 SOUTH BISCAYNE BLVD. SUITE 850 MIAMI, FL 33131	DO NOT WRITE IN THIS SPACE	
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 terminating) DATE		
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SIMONETTI, ISABELLA 201 SOUTH BISCAYNE BLVD. MIAMI, FL 33131	DO NOT WRITE IN THIS SPACE
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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.		
SIGNATURE: <u>X <i>Isabella Simonetti</i></u> <u>01/14/2008</u>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE		Date (Printing Name)