

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 05, 2004 8:00 am
Secretary of State

05-05-2004 90004 008 ****50.00

DOCUMENT # L01000017254 1. Entity Name AMIA, L.L.C.					
Principal Place of Business 6401 SW 87 AVE STE 202 MIAMI, FL 33173			Mailing Address 6401 SW 87 AVE STE 202 MIAMI, FL 33173		
2. Principal Place of Business Corona Commercial Plaza		3. Mailing Address PO Box 363148			
Suite, Apt. #, etc. Progreso St. #54		Suite, Apt. #, etc. 			
City & State Santurce, PR		City & State San Juan, PR		4. FEI Number 65-1144925	
Zip 00909		Country PR		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
Zip 00936-3148		Country PR		04292004 Chg-LLC CR2E083 (10/03)	
6. Name and Address of Current Registered Agent FIGUEROA, RONALDO R 6401 SW 87 AVE STE 202 MIAMI, FL 33173			7. Name and Address of New Registered Agent Name MJF Resident Agent Corp. Street Address (P.O. Box Number is Not Acceptable) 153 Sevilla Avenue City Coral Gables, FL Zip Code 33134-6006		
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 Res DATE 4/30/04 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$50.00 Due by May 1, 2004		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FIGUEROA, RONALDO R 6401 SW 87 AVE STE 202 MIAMI, FL 33173	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice-President & Manager Antonio J. Muñoz Sierra Alta, 15 - 1 St. San Juan, PR 00926	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer & Manager Armando A. Muñoz La Sierra del Río, P-12, 4 St. San Juan, PR 00926	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
11. I hereby certify that the information supplied with this filing does not qualify 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 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:			Antonio J. Muñoz		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>			<small>Date</small> 4-29-04 <small>Daytime Phone #</small> (787) 729-0050		