

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000004932

Entity Name: AMALFI INVESTMENTS, LLC

FILED
Apr 28, 2005
Secretary of State

Current Principal Place of Business:

4444 BRICKELL AVE.
SUITE 210
MIAMI, FL 33131

Current Mailing Address:

520 BRICKELL KEY DR. #1107
MIAMI, FL 33131

New Principal Place of Business:

444 BRICKELL AVE.
SUITE 418
MIAMI, FL 33131

New Mailing Address:

444 BRICKELL AVE
418
MIAMI, FL 33131

FEI Number: 36-4490587

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.
941 FOURTH STREET #200
MIAMI BEACH, FL 33139 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: MGR () Delete
Name: VILLAMIZAR, SERGIO
Address: 444 BRICKELL AVE., #210
City-St-Zip: MIAMI, FL 33131

Title: S () Delete
Name: VILLAMIZAR, ALEJANDRO
Address: 444 BRICKELL AVE., #210
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: VILLAMIZAR, ALEJANDRO
Address: 444 BRICKELL AVE., #418
City-St-Zip: MIAMI, FL 33131

Title: MGR (X) Change () Addition
Name: VILLAMIZAR, SERGIO
Address: 444 BRICKELL AVE., #418
City-St-Zip: MIAMI, FL 33131

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: ALEJANDRO VILLAMIZAR

MGR

04/28/2005

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