2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000005295

Entity Name: AINA HOLDINGS, L.L.C.

Current Principal Place of Business:	**New Principal Place of Business:**
1100 NW 163 DR MIAMI, FL 33169	

Current Mailing Address:	**New Mailing Address:**
1100 NW 163 DR MIAMI, FL 33169	

FEI Number: 01-0621039   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
MEDINA, MAGDALENA 1717 NORTH BAYSHORE DR APT 2234 MIAMI, FL 33132 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: _____

                  Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MANAGERS: **ADDITIONS/CHANGES:**

Title:	MGRM ( ) Delete	Title:		( ) Change ( ) Addition
Name:	MEDINA, MAGDALENA	Name:		
Address:	1717 NORTH BAYSHORE DR - APT 2234	Address:		
City-St-Zip:	MIAMI, FL 33132	City-St-Zip:		
Title:	MGRM ( ) Delete	Title:		( ) Change ( ) Addition
Name:	SANCHEZ, STELLA	Name:		
Address:	11490 NORTH BAY SHORE DR.	Address:		
City-St-Zip:	MIAMI, FL 33181	City-St-Zip:		
Title:	MGRM ( ) Delete	Title:	MGRM	(X) Change ( ) Addition
Name:	RESTREPO, CAMILO	Name:	RESTREPO, CAMILO	
Address:	888 BRICKELL KEY DR - APT 1409	Address:	41 SE 5TH ST - APT 1002	
City-St-Zip:	MIAMI, FL 33131	City-St-Zip:	MIAMI, FL 33131	

I hereby certify that the information supplied with this filing does not qualify 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: CAMILO RESTREPO   MGRM   04/22/2009
_____
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date