

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000013656

Entity Name: VILLENA INVESTMENTS, LLC

FILED
Apr 28, 2006
Secretary of State

Current Principal Place of Business:

7360 NW 78 ST.
MIAMI, FL 33166

New Principal Place of Business:

8373 NW 74 STREET
MIAMI, FL 33166

Current Mailing Address:

PO BOX 652623
MIAMI, FL 33265

New Mailing Address:

8373 NW 74 STREET
MIAMI, FL 33166

FEI Number: 01-0408848

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VILLENA, NILO E
7360 NW 78 ST.
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

VILLENA, NILO E JR
8373 NW 74 STREET
MIAMI, FL 33166 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: NILO E. VILLENA JR.

04/28/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: VILLENA, JR., NILO E
Address: 7360 NW 78 ST.
City-St-Zip: MIAMI, FL 33166

Title: MGR () Delete
Name: VILLENA, NILO E
Address: 7360 NW 78 ST.
City-St-Zip: MIAMI, FL 33166

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: VILLENA, JR., NILO E
Address: 8373 NW 74 STREET
City-St-Zip: MIAMI, FL 33166

Title: MGR (X) Change () Addition
Name: VILLENA, NILO E
Address: 8373 NW 74 STREET
City-St-Zip: MIAMI, FL 33166

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: NILO E. VILLENA JR.

MGR

04/28/2006

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