

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

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FILED
Mar 16, 2006 8:00 am
Secretary of State

03-01-2006 90228 010 ****50.00

DOCUMENT # L02000016240 1. Entity Name NEXPRO INTERNATIONAL LLC	
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Principal Place of Business 1460 M-NW 107TH AVENUE MIAMI, FL 33172	Mailing Address 1460 M-NW 107TH AVENUE MIAMI, FL 33172
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DO NOT WRITE IN THIS SPACE

30002704



01182006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 75-3086065	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$5.00 Additional - Fee Required	

6. Name and Address of Current Registered Agent

**ALVARO CASTILLO B., P.A.
1390 BRICKELL AVE. SUITE 200
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 reappointing)

DATE _____

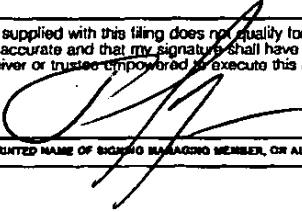
**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE MGR	NAME NEW CONSULTANTS LTD.
STREET ADDRESS 1390 BRICKELL AVE. SUITE 200	
CITY - ST - ZIP MIAMI, FL 33131	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:  **PEDRO SERRERA** 3-13-06 305 113.9130

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #



ATTACHMENT

30002704

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 3, 2006

NEXPRO INTERNATIONAL LLC
1460 M-NW 107TH AVENUE
MIAMI, FL 33172

Subject: NEXPRO INTERNATIONAL LLC

Reference Number: L02000016240

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by a managing member, manager or an authorized representative of the limited liability company.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

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ANNUAL REPORTS SECTION