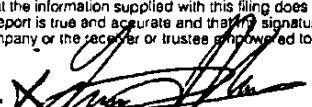


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

4/ Jun 13, 2005 8:00 am
Secretary of State

04-08-2005 90275 022 ****50.00

DOCUMENT # L02000018178			
1. Entity Name E.Y.A. INTERNATIONAL GROUP, L.L.C.			
Principal Place of Business 5608 NW 161 ST MIAMI LAKES, FL 33014		Mailing Address 5608 NW 161 ST MIAMI LAKES, FL 33014	
2. Principal Place of Business		3. Mailing Address 8688 SW 158 PL	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State Miami, FL	
Zip	Country	Zip	Country
33193	USA	33193	USA
4. FEI Number 13-4204179		Applied For Not Applicable	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required		04052005 Chg-LLC CR2E083 (10/03)	
6. Name and Address of Current Registered Agent BIBLOVICH, ENRIQUE 3300 NE 191 ST., #1114 AVENTURA, FL 33180		7. Name and Address of New Registered Agent Name Enrique Biblovich Street Address (P.O. Box Number is Not Acceptable) 8688 SW 158 PL City Miami FL Zip Code 33193	
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 _____ (NOTE: Registered Agent signature required when reappointing) DATE _____			
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BIBLOVICH, ENRIQUE 3300 NE 191 ST., #1114 AVENTURA, FL 33180 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Biblovich, Enrique 8688 SW 158 PL Miami FL 33193 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BIBLOVICH, YURI 3300 NE 191 ST., #1114 AVENTURA, FL 33180 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Biblovich, Yuri 8688 SW 158 PL Miami FL 33193 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BIBLOVICH, ALEJANDRA 3300 NE 191 ST., #1114 AVENTURA, FL 33180 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Biblovich, Alejandra 8688 SW 158 PL Miami FL 33193 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ 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: 		04/01/05 (786) 285-6967	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date Daytime Phone #	

30009400

