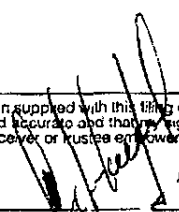


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 21, 2004 08:00 AM
Secretary of State

DOCUMENT # L02000019149		
1. Entity Name CURLY GROUP, LLC		
Principal Place of Business 444 BRICKELL AVENUE, STE. 309 MIAMI, FL 33131		Mailing Address 444 BRICKELL AVENUE, STE. 309 MIAMI, FL 33131
DO NOT WRITE IN THIS SPACE		
		 09142004No Chg-LLC CR2E083 (10/03)
		4. FEI Number 55-0795214
		5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required
6. Name and Address of Current Registered Agent		DO NOT WRITE IN THIS SPACE
STOLZENBERG, KEITH H ESQ RAFFERTY HART ET AL 1401 BRICKELL AVENUE, SUITE 825 MIAMI, FL 33131		
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 if Not Applicable (NOTE: Registered Agent signature required when reinstating) DATE		
Filing Fee is \$50.00 Due by September 8, 2004		
9. MANAGING MEMBERS/MANAGERS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM CHUMACEIRO, LUIS 444 BRICKELL AVENUE, STE. 309 MIAMI, FL 33131	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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:  Fabiola Nuñez		(305) 679-9943
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE		Date Daytime Phone #
Authorized Representative		

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