2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000023056

Entity Name: GI-DEL INVESTMENT, LLC

FILED Mar 01, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2333 PONCE DE LEON BLVD. 4631 NW 94 CT

SUITE 302 MIAMI, FL 33178 US

CORAL GABLES, FL 33134 US

Current Mailing Address: New Mailing Address:

2333 PONCE DE LEON BLVD. PO BOX 720128

SUITE 302 MIAMI, FL 33172 US

CORAL GABLES, FL 33134 US

FEI Number: 55-0797051 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:

SANCHEZ-MEDINA, ROLAND
2333 PONCE DE LEON BLVD.
SUITE 302

LEE, XIOMARA
2380 SW 80 CT
MIAMI, FL 33155 US

SUITE 302 MIAMI, FL 33155 L CORAL GABLES, FL 33134 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: XIOMARA LEE 03/01/2005

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 LAZO, DELIA
 Name:
 LAZO, DELIA

 Address:
 2333 PONCE DE LEON BLVD., SUITE 302
 Address:
 4631 NW 94 CT

 City-St-Zip:
 CORAL GABLES, FL 33131
 City-St-Zip:
 MIAMI, FL 33178

Title: MGR () Delete Title: MGR (X) Change () Addition Name: LAZO, DELIA Name: SANCHEZ-MEDINA, GISELA

 Address:
 2333 PONCE DE LEON BLVD., SUITE 302
 Address:
 4631 NW 94 CT

 City-St-Zip:
 CORAL GABLES, FL 33131
 City-St-Zip:
 MIAMI, FL 33178

Title: MGR (X) Delete Title: () Change () Addition

Name: SANCHEZ-MEDINA, GISELA Name:

Address: 2333 PONCE DE LEON BLVD., SUITE 302 Address: City-St-Zip: CORAL GABLES, FL 33131 City-St-Zip:

Title: MGR (X) Delete Title: () Change () Addition

 Name:
 SANCHEZ-MEDINA, GISELA
 Name:

 Address:
 2333 PONCE DE LEON BLVD., SUITE 302
 Address:

 City-St-Zip:
 CORAL GABLES, FL 33131
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DELIA LAZO MGR 03/01/2005