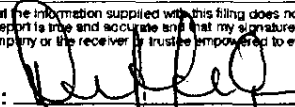


FILED
Apr 30, 2003 8:00 am
Secretary of State

04-30-2003 90190 009 ****55.00

**2003 LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # L02000023172																																					
1. Entity Name TALLER ROLDAN, LLC																																					
Principal Place of Business 4770 BISCAYNE BLVD STE. 1040 MIAMI, FL 33137		Mailing Address 4770 BISCAYNE BLVD STE. 1040 MIAMI, FL 33137																																			
2. Principal Place of Business 546 n.e 199th Lane		3. Mailing Address 546 n.e 199th Lane																																			
Suite, Apt. #, etc. 4-w		Suite, Apt. #, etc. 4-w																																			
City & State Miami, FL		City & State Miami, FL																																			
Zip 33179		Country USA																																			
4. FEI Number		☒ Applied For ☐ Not Applicable																																			
5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required																																					
6. Name and Address of Current Registered Agent USA SOLUTIONS, LC 4770 BISCAYNE BLVD STE. 1040 MIAMI, FL 33137																																					
7. Name and Address of New Registered Agent Name America Visa Network Street Address (P.O. Box Number is Not Acceptable) 546 n.e 199th Lane 4-w City Miami FL Zip 33179																																					
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 America Visa Network Devanire Gonzalez.MGRM 04/22/03 DATE																																					
9. MANAGING MEMBERS/MANAGERS <table border="1"><thead><tr><th>TITLE</th><th>NAME</th><th>STREET ADDRESS</th><th>CITY-STATE-ZIP</th><th>DELETE</th></tr></thead><tbody><tr><td>MGRM</td><td>ROLDAN, ALVARO S</td><td>546 N.E. 199th Lane #4w</td><td>MIAMI, FL 33179</td><td>☒</td></tr><tr><td>MGRM</td><td>CASTANEDA, CLAUDIA P</td><td>546 N.E. 199th Lane #4w</td><td>MIAMI, FL 33179</td><td>☐</td></tr><tr><td>MGRM</td><td>ROLDAN, JUAN PABLO</td><td>546 N.E. 199th Lane #4w</td><td>MIAMI, FL 33179</td><td>☐</td></tr><tr><td>MGRM</td><td>ROLDAN, JOSE MANUEL</td><td>546 N.E. 199th Lane #4w</td><td>MIAMI, FL 33179</td><td>☐</td></tr><tr><td>MGRM</td><td>OCHOA, ANDREA</td><td>546 N.E. 199th Lane #4w</td><td>MIAMI, FL 33179</td><td>☐</td></tr><tr><td></td><td></td><td></td><td></td><td>☐</td></tr></tbody></table>			TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE	MGRM	ROLDAN, ALVARO S	546 N.E. 199th Lane #4w	MIAMI, FL 33179	☒	MGRM	CASTANEDA, CLAUDIA P	546 N.E. 199th Lane #4w	MIAMI, FL 33179	☐	MGRM	ROLDAN, JUAN PABLO	546 N.E. 199th Lane #4w	MIAMI, FL 33179	☐	MGRM	ROLDAN, JOSE MANUEL	546 N.E. 199th Lane #4w	MIAMI, FL 33179	☐	MGRM	OCHOA, ANDREA	546 N.E. 199th Lane #4w	MIAMI, FL 33179	☐					☐
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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 606, Florida Statutes. SIGNATURE:  04-22-03 (305) 652-6375 SIGNATURE AND INKED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #																																					

CRS033 (10/02)