2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2006
Secretary of State

DOCUMENT# L02000024434

Entity Name: MUELLE & ASSOCIATES, LLC

Current Principal Place of Business:

2100 CORAL WAY, STE. 502
MIAMI, FL 33145

New Principal Place of Business:

6041 TWIN LAKE DRIVE
MIAMI, FL 33143

Current Mailing Address:

2100 CORAL WAY, STE. 502
MIAMI, FL 33145

New Mailing Address:

6041 TWIN LAKE DRIVE
MIAMI, FL 33143

FEI Number: 59-2074699 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MUELLE, ALEJANDRO ESQ.
2100 CORAL WAY, STE. 502
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

MUELLE, ALEJANDRO ESQ.
6041 TWIN LAKE DRIVE
MIAMI, FL 33143 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: _____ 04/27/2006
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: MULLE, ERIK A
Address: 2100 CORAL WAY, STE. 502
City-St-Zip: MIAMI, FL 33145

Title: MGRM ( ) Delete
Name: MULLE, ALEJANDRO
Address: 2100 CORAL WAY, STE. 502
City-St-Zip: MIAMI, FL 33145

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: MUELLE, ERIK A
Address: 6041 TWIN LAKE DRIVE
City-St-Zip: MIAMI, FL 33143

Title: MGRM (X) Change ( ) Addition
Name: MUELLE, ALEJANDRO
Address: 6041 TWIN LAKE DRIVE
City-St-Zip: MIAMI, FL 33143

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: ERIK MUELLE MGRM 04/27/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date