2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

STREET ADDRESS -CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

STREET ADDRESS

FILED Feb 16, 2005 08:00 AM DOCUMENT # L02000024543 Secretary of State 1. Entity Name METAL AT OVERLOOK, LLC Mailing Address Principal Place of Business **6333 SUNSET DRIVE** 801 NW 47AVE SOUTH MIAMI, FL 33143 **OFFICE** MIAMI, FL 33125 02092005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0805474 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE SALAS, RAUL ESQ SALAS, EDE, PETERSON & LAGE, L.L.C. 6333 SUNSET DRIVE IN THIS SPACE SOUTH MIAMI, FL 33143 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. (NOTE. Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. UUUUUUZBIBBB 02/16/05-80056-002 200.00 Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGR TITLE CALLEJA, LUIS NAME STREET ADDRESS 6333 SUNSET DRIVE CITY-ST-ZIP SOUTH MIAMI, FL 33143 02/13-05-05-010200.00 MGRM TITLE CALLEJA, AGRIPINA NAME 7201 SW 77 CT STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33143 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME

11. I hereby certify that the information supplied with this filling 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.